Worth More Than a Million!

What Medical Science and Scripture say About Immunity to Disease.
A Manual on Preventive Medicine Showing how Unnecessary Illness, Pain and
Premature Death may be Avoided.

by
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Dedicated to the many Christian physicians it is my privilege to know as friends—men who have followed in the steps of the Great Physician and practiced medicine according to his principles.
Surgeon General of the U.S., "You, the individual, can do more for your own health and well-being than any doctor, any hospital and drug, any exotic medical advice."

"Ninety-nine percent of us are born healthy and suffer premature death and disability only as a result of personal misbehavior and environmental conditions." Dr. J. Knowles

Seventy percent of diseases (at least) are diseases of choice. "For this cause many among you are weak and sickly and some have died" 1 Corinthians 11:30. "The curse causeless shall not come" Proverbs 26:2.

The doctor of the future will give no medicine, but will interest his patients in the care of the human frame and in the cause of and prevention of disease. Thomas A. Edison
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Introduction

Why this book may be worth more than a million to you.

If I could choose between giving each of my friends a million dollars or giving them the information found in the following pages, I would unhesitatingly choose the latter. Though I never expect to be a millionaire, I feel one all the time because three great truths through the mercy of God have gripped my soul. The first and best is the unchanging sovereign love of God as revealed in the gospel of the cross. The second is the reality of the indwelling of the divine Spirit in the body temple, and the third is that everything in the universe is controlled by law, a law which, if obeyed, proves itself to be a law of love and wisdom. Anyone who believes these three things has it made, for these convictions effect beneficially every habit and practice of the life.

Over approximately forty years in Christian ministry, I have spent many hours in hospital wards and rooms hovering over sickbeds. Most of that suffering was unnecessary and I have longed to do something to help others avoid such preventable agonies. So here it is — a book summarizing forty years of study and thought on preventive medicine.

Next to the Bible, this may be the most important book you have ever read — not because of any special virtue of the author, but because here is gathered up the life-saving knowledge now agreed upon internationally for the first time in history.

What am I claiming? That the writer of this book is some super athlete destined to live to 120? Not at all. I am not an athlete’s bootlace, despite the fact that since the age of thirty I have run approximately 30,000 miles and walked more than that. Though I have not been hospitalized over the last fifty years, and though my figures for weight, blood pressure, pulse, cholesterol are at least as good as those of most in their twenties, I do not consider myself to be even the faintest shadow of an Apollo. Never have I thought of myself as being particularly healthy. Because my program has been unusually hectic for decades and because by temperament I am intense and highly strung, it has always seemed to me that I survive only by the grace of God. I am sure that the ignorance, weakness, and folly, I, along with all other members of the race have repeatedly manifested, have left their inevitable scars. Furthermore, there is no aspect of my present life, despite constant effort, that could not be markedly improved. But this I know, but for the truths mentioned in the first paragraph, one of two things would most certainly have happened to me — either I would have departed this life, or I would have ceased to have been of the slightest use to God or man. Such was the prognosis offered me by a splendid physician when I was twenty-three years old.

The study of preventive medicine has not been an idle interest, or a casual avocation, but a necessity in my case. For me, it was a matter of learning or dying. Maybe some of my readers are in a similar category — perhaps even most, though for a diversity of reasons. My sins have chiefly accorded with the biases of my temperament, including the life-threatening habit of hours a day bent over repositories of ideas and typewriters. Your health “sins” probably also spring out of the biases of your constitution and tendencies.

We human beings are characterized by stupidity. In no instance, except that of willful wickedness, is our folly made more manifest and leads to a more devastating effect than in the matter of life-style. Living is the finest of all fine arts, but the multitudes seek to know how to “make” a living, not how to live. How appropriate the inspired words: “My people are destroyed for lack of knowledge” (Hos 4:6), and how blessed the promise “ye shall know the truth and the truth shall make you free” (Jn 8:32).

Christians who recognize that they are not their own (for they were bought with a price) should also see that their very first duty, after love to God and man, is self-development. Until we have something worth offering to God and man, of what value is our existence? If the talent of life is buried, so to speak, in the ground of ignorance and carelessness, will we not be accountable in the great Day?

Just suppose you had a machine that could turn out hundred dollar notes. (Forget the legal problem.) Which would you care about most, the notes you had made or the machine? Or, suppose you knew you could only ever have one car. How would you treat it? Well, you will in this life have only one body. If you abuse any part of it beyond return, that's it! There never will be a replacement heart as good as our first. There never will be artificial kidneys or lungs like our original ones. Should we not care for our body as the most priceless treasure, an exceedingly vulnerable treasure?

None of us would wish to travel above the mighty oceans in a jumbo jet that was never thoroughly serviced. Strange, is it not?

Take the matter of fuel. We are fussy about fuel for machines and even for animals, yet rarely so for ourselves. What can explain that madness? We are what we eat, but who wants to be a Big Mac, or a sponge cake, or a French fry? The evidence now being done on neurotransmitters indicates that to some degree thinking is as certainly biological as digestion. Therefore, the computer motto GIGO should be seriously meditated upon by all — GARBAGE IN, GARBAGE OUT. Irritability, depression, senility are frequently the consequence not of ill or weak will but of GIGO.

There is a new day dawning in medicine. Fortunately so, for the old ways are destroying us individually and nationally. The nation now spends more on medical care than on defense, exceeding 10 percent of the budget, and individuals average health expenditures beyond that required for cars and gasoline. Furthermore, the chief cause of personal bankruptcy is medical expense.

For the first time in history there is now agreement among the experts as to the chief elements of a healthy life-style. We now know what causes premature death, and we know how most people can avoid it. Even at the beginning of this decade, that was not the case. The most expensive medical experiment in history (interpreted in the 1980s) concluded that the chief cause of unnecessary death was the excessive use of animal products. For the Western world that news was more than a flash of lightning — it was the rising of the sun upon arctic wastes that had long been clothed in neither gloom.
In very recent times studies have demonstrated that changes in life-style, not medical drugs or special therapies, were responsible for the wiping out of most infectious diseases. Simultaneously, the knowledge has come that the major diseases now killing nearly two million people a year in this country alone are preventable. Third World countries which use animal products only as condiments or garnishes and that eat food without processing or refining are not plagued by our chief killers. Epidemiologists all over the world have now agreed that the chief causes of premature death are the excess consumptions of cholesterol, fatty and refined foods, and salt, and in the case of AIDS – promiscuity and drugs. Ninety percent of cancer is caused by what we put between our lips, and a similar proportion applies to most of the other major chronic diseases.

The secret of winning the battle of the bulge is also out. Those who keep animal products to a minimum (for they are all fibreless) and eat abundantly of fresh, whole foods, while exercising modestly, will no more put on excess weight than do animals in the wilds.

After decades during which our medical men never had it so good, there has come, with the new insights, a barrage of scientific criticism of hitherto cherished medical protocol. Many of the old ways will not now endure. Soon those medical men who cling to them will be regarded as ignorant old fogies. We have become aware of the devastation being caused by indiscriminate drug therapy, the extreme fallibility of many medical tests, the unnecessary nature of much surgery, the dangerous condition of most hospitals for any but the very healthy, and above all the infinite harm wrought by the abysmal ignorance of most doctors about nutrition. The advice of Thomas Edison is about to be taken seriously. He said, "The doctor of the future will give no medicine, but will interest his patients in the care of the human frame and in the cause of and prevention of disease."

None of the above denies the multitude of lives being saved in every city by the right use of medical procedures by skilled and dedicated physicians and surgeons. It does not deny the indispensable nature of the modern hospital, certain drugs, surgeries, etc. Abuse never cancels use. All we are saying is that specialists all over the world are pointing out that medicine, like every other field of human endeavor, is a mixture of good and ill and that the ill must be corrected. Above all, we are not denying the blessed truth that a large proportion of our medical personnel are indeed devoted to the ideals of Hippocrates and that such people do their best to practice such ideals often at their own risk. In this age, when malpractice suits have become a disgraceful social rash, foolish is the person who does not recognize that laypeople, themselves, are often the cause of some of the unnecessary risks taken regularly in modern medical practice.

Certain of the basic conclusions of modern medical researchers can be easily understood and simply applied by the layperson. The acknowledged fact that all the entire medical system can do for any one of us is to contribute an average of 10 percent towards our health is itself an emancipating truth. It frees the learner from the bondage of irresponsibility, and it demands an exacting inquiry into the nature of one's own habits. To realize that what we don't know CAN hurt us, even kill us, brings the healthy hunger for that knowledge which is the condition of quality life. Knowing that there is a thirty-year difference potentially between a good and a bad life-style, when linked with the fact that health is that which we must have to do that which we want to do, guarantees in any sane person the type of personal reformation which can be like the rising of the sun.

For the Christian these modern discoveries are exciting, inasmuch as they echo ancient teachings of Scripture about life-style. All the major principles of health are found in the opening pages of the Bible and enlarged throughout its sixty-six books. Scripture does not call for asceticism or any form of rejection of the temperate use of all God's good gifts. Our Creator, not the devil, invented matter, flavors, fragrances, melody, sex – indeed all the pleasures of the senses. The way of life he has given us will not cramp our style or limit our joys. On the contrary, only those who live according to the biblical counsels will enjoy unending pleasure and satisfaction. God does not ask us to "give up" but to exchange. We exchange the worse for the better, the harmful for the life-giving, the disappointing for the satisfying. For those who are motivated by the good news of the forgiveness of sins, "for joy thereof" they gratefully bring their habits into harmony with the natural and spiritual laws of their Maker and Redeemer.

In this volume we have only touched the surface of the wide sea of personal human ills. We have concentrated on those problems where there is now a prevailing unanimity as to what can be done to prevent illness, and these happen to be the major chronic diseases of our time. Because the average period of infirmity for moderns is now nearer 10 percent of the life span, rather than the 1 percent of earlier eras, this knowledge regarding the causes and prevention of chronic disease is worth more than gold.

There is little that is original in the following pages. But convictions spawned over approximately four decades of study have crystallized. It is striking that there is now a unity of thought among the best writers on life-style that has long been lacking in more orthodox medical works. Only in the present decade do we find such reputable journals as The Lancet, JAMA, The New England Journal of Medicine, The American Journal of Medicine, Annals of Internal Medicine, etc., echoing what has long been said by the apostles of preventive medicine in many countries.

Some of the very criticisms that writers like V. Coleman, Ivan Illich, John Bradshaw, Samuel Epstein, D. Gould, S. Greenberg, H. Davies, B. Dixon, E. B. Gallagher, M. L. Gross, J. S. Maxmen, Richard Taylor, Rene Dubos, Archibald Cochrane, Thomas McKeown, John Powles (many of these writers are themselves doctors), and a multitude of others have made are now echoed in the halls of the orthodox. At long last many of these critics are being listened to. For example, in Eugene D. Robin's book Medical Care Can Be Dangerous to Your Health, (previously published as Matters of Life and Death) we find an acknowledgement that he found Richard Taylor's book Medicine Out of Control, The Anatomy of A Malignant Technology "an important source of reference." Robin has been on the faculties of the Harvard Medical School and the University of Pittsburgh Medical School, as well as professor at Stanford University, and he represents many modern leaders of medicine who see the need for drastic change in many current therapeutic practices.

Associated with the work of approximately forty international committees in about the last decade have come some very significant and concise government documents, including LaLonde's "Reports on the Health of Canadians," the "Shrivastava Commission on Health Care in India," and WHO studies produced under the guidance of Dr. H. Mahler. These agree on the steps to be taken by individuals and nations.
Studies in epidemiology are at last making their impact on current thought and their testimony also is remarkably uniform about the factors linked with the health of populations. One study that has influenced many in recent years is that of Drs. Breslow and Berkman, known as the Alameda County Study, which was published by the Oxford University Press a few years ago under the title "Health and Ways of Living, The Alameda County Study." This work showed the impact of well-known risk factors upon health – smoking, obesity, lack of exercise, alcohol abuse, breakfast omission, eating between meals, lack of sleep. It demonstrated that health is not so much dependent upon professional medical care available as upon daily habits. A comparable study, that of a long-term work done at Framingham has been frequently summarized by Dr. W. P. Castelli, and many of the medical journals have published those summaries. Castelli particularly stresses the fact, now well recognized, that the main causes of death are smoking, hypertension, elevated serum cholesterol, obesity, lack of exercise, stress and diabetes.

While for decades medical journals have been known for their lack of articles on preventive medicine and their concentration on esoteric curative approaches that only a minority would read with practical profit, things are now beginning to change. The Lancet set the new fashion by publishing a series of articles on nutrition in 1983. Nutrition has long been a Cinderella in the medical profession, but can remain such no longer. Typical of this change in the journals are the publication already mentioned of Castelli's work, articles on nutrition, and articles on exercise such as the recent Paffenbarger study, printed in The New England Journal of Medicine in 1986, and Oberman's study, "Exercise and the Primary Prevention of Cardiovascular Disease" in the Medical Journal of Cardiology, 1985. Not only The Lancet, The New England Journal of Medicine, and JAMA now have articles on nutrition, but the same is true of the Journal of the National Cancer Institute, which this decade published the study by Bakshi and Toma, "Diet, Nutrition, and Cancer: Interim Dietary Guidelines" (1983). The Canadian Family Physician Journal is also publishing significant articles on life-style factors. For example, a seven-part series was commenced in July, 1984. It used the word Fantastic as a memory device and a simple assessment tool for measuring major life-style risks associated with the following areas: family and friends, activity, nutrition, tobacco/toxins, alcohol, sleep/seatbelts/stress, types of personality, insight and career.

Thus, a new day has dawned with government bodies, professional journals, professors of medicine in universities, all agreeing on the necessity of practicing preventive medicine and giving primacy to life-style factors rather than high-tech medical intervention. The good sense epitomized by Denis Burkitt's picture of a hospital ward where a faucet on the wall is open full bore, pouring out a cataract of water, while physicians and doctors are attempting to swab up the flood on the floor with cloths, is now acknowledged. Governments are realizing that their mounting health bills cannot long be sustained. There has to be a new approach to medicine or the health-care system will collapse. In view of this evidence, we would suggest that the positions, in general, advocated on the following pages, are no longer viewed as odd or esoteric. Most of them are now taken for granted. What is needed by world populations is not more information, so much, as education in the information already available and motivation in particular. The latter can only be supplied at its best by the gospel. Those who confess "the love of Christ constraineth me" (2 Cor 5:14) have the highest quality of motivation available to human beings. This book endeavors to draw upon that motivation, recognizing as health professionals have long confessed, the inadequacy of mere information and education alone.

While we have given primacy to concepts found in the Christian revelation, that is – Scripture, we have only advocated those things clearly supported by the best of modern research. It is Scripture that says "it is not the spiritual which is first but the physical, and then the spiritual" (1 Cor 15:46 RSV). Likewise, Scripture advocates that "What God has joined together, let not man put asunder." This principle we recognize as primarily addressing the matter of marriage but applying also in many other areas, as the following pages point out. Scripture speaks of the necessity of earning one's labor by the sweat of one's brow, and it also speaks of the need of recurring rest. Here, also, we find the warning that there can be "death in the pot," and that much sickness, though, of course, not all, is the result of sinful habits. "Sin no more lest a worst thing come upon thee" (Jn 5:14), yet it is also often true that "He whom thou lovest is sick" (Jn 11:3). Again, it is in the word cherished by ancient Israel that we read: "A merry heart doeth good like a medicine," but "A broken spirit drieth the bones."

Psychosomatic medicine is more fully set forth in the Bible than in any other book in print. Psychiatrists of top rank recognize that the life-style advocated in the Sermon on the Mount is one that reflects and is productive of mental health. The biblical warnings against pride, selfishness, impurity, worry, hatred, and excessive indulgence of the passions, in general, is up-to-date with the best that is known in modern research. These and many other topics found in Scripture are discussed in the following pages, and given support from current medical literature. Our main intent, of course, is to help fulfill the promise of Christ that believers "might have life, and have it more abundantly" (Jn 10:10). To that end also we discuss what may be the chief medical and social problem for the rest of time – AIDS.

Worth More Than a Million is not intended to replace your counseling with an intelligent, dedicated physician. The writer is but a layman himself. (His academic degrees are in other fields.) But don't make the mistake of thinking that all physicians are equally capable and reliable. That simply is not true. Physicians vary as much as ministers, lawyers, and politicians. Observe the life-style of your own doctor. Does he smoke? drink? is he overweight? does he exercise?

These are no casual inquiries. Above all, does he read what he should read? If you make a mistake in your appraisal, the cost may be your life.

We confess that in this volume we have found no way of solving the gender problem. We long for the time when linguists will find a sexless word for humans. Meanwhile, in your charity do not conclude that our global vocabulary problem reflected here means a downgrading of one sex and a glorifying of the other. After all, this should be the first book to admit the medical truth that women medically are the superior sex, less vulnerable to most of the diseases which kill men. Women usually outlive men, as well as accomplishing the most important responsibilities of society – namely the bringing forth and the early training of those who will determine the future of the world.

It is the aim of this work to distill the most valuable insights of modern preventive medicine and to buttress them by Scripture's inspired counsels on life-style. Each chapter is simple enough so that "he who runs may read" in order that "the wayfaring man though a fool need not err therein." But attached to many presentations is a series of footnotes for the giraffes among my
readers. [Occasionally we use medical reports of earlier decades if the principle or practice referred to still applies.] If you wish to go higher and further the sky is the limit, and the sources here given will make rapid and profitable progress an easy affair. The reader is urged to ponder well the introductory key statements and the practical summaries of each chapter. We believe that each of these could be worth more than a million to you and to your family.

While official men of medicine have scrutinized the manuscript of this book, and given counsel to its author, the latter alone is to blame for residual errors. The only way to find a perfect book is to write it oneself.

Gladly I wish to register my gratitude to Janie Coon who capably dealt with peccable (note: peccable – opposite of impeccable) manuscripts, and indispensable Marian Fritz, who not only proofread but watched for infelicities in style. Not the least tribute should go to my life-partner Gill, who tolerated mounds of books in every room of the house for months, without threat of grievous bodily harm and/or lasting separation. As usual, she has gone the second mile reading and improving the manuscript. Luke, who also for months has had to thread his way between book piles, no doubt has resolved that his home of the future will be less like the Old Curiosity Shop.

May the One who made us so wondrously, he who demonstrated his love not only by the bestowal of a body temple that manifests a thousand miracles in every cell-brick, but by dying to redeem that temple – may he draw near each reader, making plain the way to the life more abundant.
SECTION I
PRINCIPLES OF PREVENTIVE MEDICINE

"I am come that they might have life, and that they might have it more abundantly"

(Jn 10:10)

CHAPTER 1
Why Settle for Pain?

In this chapter we learn that about one-third of Americans suffer chronic pain and for the most part unnecessarily. The aim of the chapter is to show that the best way to deal with pain is to prevent it by right life habits. Minutes and cents wisely invested daily can do what years of therapy and many thousands of dollars in medical expenses will fail to do in later years. A fence at the top of the cliff is much to be preferred to an ambulance at the foot, and it is far better to turn off the running faucet than to spend one's time in unending mopping up.

The Fall 1986 edition of Stanford Medicine says on page 14, "There probably won't ever be a cure for AIDS ... only treatments to suppress symptoms." The same is true of almost all the chronic diseases that cause pain. People who think that modern medicine has the cure for all diseases are quite wrong. Prevention is the only sure way of avoiding pain.

* * * *

America's loss of faith in the medical establishment gave a strong symbolic push to the paradigm shift from institutional help to self-help. When we entered the 1970s without the long-promised cure for cancer, people began to question the omnipotence of science. It was during the 1970s, of course, that interest in diet and nutrition soared....

John Naisbitt, Megatrends, p. 146.

* * * *

The new emphasis on the human angle shows up in three major trends behind the move from institutional help (the medical establishment) to self-help (personal responsibility for health): (1) New habits that actualize our newfound responsibility for health; (2) Self-care that illustrates our self-reliance in areas not genuinely requiring professional help; and (3) the triumph of the new paradigm of wellness, preventive medicine, and wholistic care over the old model of illness, drugs, surgery, and treating symptoms rather than the whole person.

Ibid., pp. 146-147.

* * * *

... No longer do Americans feel they must run to a doctor for every minor ailment: 75 percent of the people can successfully deal with medical problems without ever walking into a clinic or doctor's office.

Ibid., p. 149.

* * * *

Ouch!

I am a coward. I hate pain. I confess often that I would swim through a sewer to avoid the cringing of the flesh. Even though dental surgeries are much happier places than they were in my boyhood, I still anticipate a visit to any such place with feelings that are miles apart from my expectation of a dish of strawberries and cream.

Second, despite my temptations to fear, I am a Christian. I believe the New Testament statement: "Know ye not that ye are the temple of God, and that the Spirit of God dwelleth in you? If any man defile the temple of God, him shall God destroy; for the temple of God is holy, which temple ye are" (1 Cor 3:16, 17). "What! Know ye not that your body is the temple of the Holy Ghost which is in you, which ye have of God, and ye are not your own? For ye are bought with a price: therefore glorify God in your body, and in your spirit, which are God's" (1 Cor 6:19, 20). The old medieval view that the Christian soul is a jewel inside a sack of dung is certainly not the position taken by Scripture. That is a relic of ancient gnosticism handed down to us from the Middle Ages. The Bible never despises the things of the body. Did not the Son of God take a body upon himself at Bethlehem? Therefore, my physical habits are of concern to God, and must be so to me.

Third, I am ambitious. My overwhelming desire is to leave this world a better place than I found it. I recognize Christian service as the rent I owe for the space I occupy. But there is nothing like sickness to interrupt service. When one is really sick, nothing else seems to matter. Not even life itself. Some of us, when suffering a migraine headache, have not been afraid that we were going to die, but afraid that we might not. While seasick four days in the Atlantic Ocean in a storm, there was nothing I would have welcomed more than death. One is just not rational at such times.

Having made my confession, let me turn to the hard facts of life for civilized people in this twenty-first-century world:

... nearly one third of the American population have persistent or recurrent chronic pain.... of these.... one half to two thirds are partly or totally disabled for periods of days, weeks or months, or for life. Chronic pain disables more people than cancer or heart disease."

As Albert Schweitzer said long ago, "Pain is a more terrible lord of mankind than even death himself." It is, for instance, the single most common reason for seeing a doctor, and the number one reason people take medication.
... For a variety of reasons, medical science is ill-equipped to deal with pain. While the twentieth century has brought remarkable advances in the treatment and some cases the elimination of disease, doctors' understanding of pain is just beginning to emerge from the Dark Ages.²

So there are untold millions in this country and in other countries suffering often traumatic pain and well aware that human help is very limited indeed. There are thirty-six million arthritics in the U.S., seventy million with agonizing back pain, about 20 million with blinding migraines, (i.e., migraines associated with temporary blindness) and then millions more suffer from the intense pain of sciatica and gout. We have left many other sufferers unnoticed, including the approximately eight hundred thousand in the U.S. who are afflicted with cancer. Cannot drugs solve this problem? A study last decade in New York City's Montefiore Hospital found that: "Nearly seventy-five percent of hospitalized patients receiving narcotics for moderate to severe pain failed to be relieved by the drugs."³ Doctors in their conscientious desire to avoid drug addiction often prescribe less pain killer than is necessary for complete relief. Our point is – prevention is better than attempted cure for pain, and all sorts of other troubles.

Ignorance Can Be Fatal

Perhaps you are saying to yourself: "I have never felt better in my life. Is this guy trying to scare me?" No, dear friend, not that. But we would wish to make plain the facts of reality. What we don't know can hurt us, even kill us. The human body is very long-suffering, and under the most terrible abuse it usually remains functional for at least twenty years before a degenerative disease manifests itself. One does not die the day of one's death. That is to say, we may be exposed to carcinogens in overwhelming amounts at a time decades before the terrible harvest is reaped. The greatest killers, heart disease and cancer, usually do not bring intense pain until near the termination of life. One can survive eating the garbage of junk foods for twenty to thirty years before nature's protest becomes so shrill that we have to heed it. So present health is no guarantee of health in the future, unless present habits are in harmony with nature's laws. Approximately one in every seven Americans enters the hospital each year. Over 35 million admissions were registered in 1985. Twice as many have to visit emergency rooms for treatment each year – that is, over 70 million.

How old are you? If you are over forty you are in a group where at least 50 percent have one or more chronic diseases which may not be life-threatening, but are incurable. Only about one person out of twenty-five over the age of sixty-five is free of chronic disease. Remember, one out of every two will die of diseases of the arterial system; and at least one in five will die from cancer. Every year nearly 6 million in this country are hospitalized for heart disease, and more than 2½ million are treated for cancer, while almost 21 million people undergo surgery. In today's moral climate, it is estimated that one in every four people between fifteen and fifty-four will contract a sexually-transmitted disease.

This is a sick world and a dangerous place. It does not pay to be ignorant in matters of health and disease. Disease never comes without a cause. The vast majority of people by their personal habits are sowing to the wind, and will reap the whirlwind. Yet such tragedy is avoidable.

Most people don't die, they kill themselves. At least 70 to 80 percent of the factors responsible for our chief diseases spring out of what we choose to put between our lips; yet most of us know no more about good nutrition than we do about the man in the moon. The single worst habit which brings unnecessary death is, of course, the use of tobacco, which is responsible for at least one thousand deaths per day. "Enlightened people in this country no longer smoke," said Morton Kondracke recently. This would mean that there are still 54 million unenlightened, but the fact is 90 percent of them have tried to give up nicotine and failed.

The use of refined foods, such as white flour, white sugar, and refined oils is almost certainly responsible for a far greater number of deaths than tobacco, and again quite unnecessarily. Millions are suiciding gradually and ignorantly because they have forsaken food as God made it for the imitations of the food processors.

Consider this fact which motivates many who pursue preventive medicine: the difference between a good life-style and a poor one, the difference between bad habits and good habits can be a thirty-year difference in life span. That is so important a truth that we will repeat it and enlarge upon it in later chapters.

I had a grandfather whom I loved very much. He would say to me, "I trust my soul to the minister, and my body to the doctor." He was wrong, dreadfully wrong, on both accounts. Like his grandson, he was not always wise. Today, the most responsible physicians of the land inform us that the whole system of health care, including hospitals, surgeons, physicians, and drugs, can contribute no more than 10 percent to our health. The other 90 percent is up to us. Furthermore, because in some instances unscrupulous people attack physicians unfairly for malpractice, doctors are forced to practice defensive medicine. This means the multiplying of tests, with all the risks and expenses inevitably involved.

Medical Tests and Hospitals Sometimes Add to Our Pain

Most people aren't aware that it is a dangerous business to have a battery of medical tests, but it is so indeed. The results of tests are frequently false positives or false negatives, leading either to unnecessary fear or unnecessary self-satisfaction. Apart from that, in some instances even the very procedure involved in testing can, be dangerous. For decades, compulsory X-rays for tuberculosis exposed people unnecessarily to radiation hazards. In many instances, people were told that they had tuberculosis when they had no such thing. In the early mammographies some women were exposed to sixty times as much radiation as others because of inexperienced radiographers and defective machines. It is no easy thing to even read the results of health tests, and experts differ in their interpretation. Sometimes the same reader differs in his evaluation of the same test results if they are submitted to him on different occasions.

If you have not heard the words iatrogenic and nosocomial, let me tell you again that what you don't know can hurt you, perhaps even kill you. These strange terms point to causes of deaths by the scores of thousands in this country every year. For example, you may consider that a hospital is a very safe place to be if you are ill. That is not the case. There are all sorts of hazards inevitably involved for a sick person in the hospital. Only a very healthy person is comparatively safe there. Over 100,000 people die a year in adverse reactions to prescribed drugs given them by physicians. Many times that number suffer
Preventing Pain Is Better Than Curing It

This is certainly no attack on conscientious physicians and the modern well-equipped hospitals in which they operate. Thank God for both. But we are giving a warning that it is better to practice preventive medicine and, wherever possible, avoid the necessity of dependence upon professional health personnel or institutions. A criticism made in the *Saturday Review*, during the 1960s still applies in the 1980s. We quote:

The United States is the best place in the world if you have a serious illness, but one of the worst if something minor is troubling you.... It is generally recognized that America is the most over-medicated, most over-operated, the most over-inoculated country in the world. It is also the most anxiety-ridden country with regard to health. As an action-minded people, we feel more comfortable doing something or having something done. Thus, we impose our life-saving drugs and techniques, intended for serious disease, upon minor, even trivial, illnesses – illnesses that are self-limited and that, except for occasional symptomatic relief, do better without interference from a physician.... Here is a second paradox: We are the world’s wealthiest country – yet one of the unhealthiest. We are flabby, overweight, and have a lot of dental caries, fluoridation notwithstanding. Our gastro-intestinal system operates like a spluttering gas engine. We can’t sleep; we can’t get going when we are awake. We have neuroses; we have high blood pressure. Neither our hearts nor our heads last as long as they should. Coronary disease at the peak of life has hit epidemic proportions. Suicide is one of the leading causes of death.... We suffer from a plethora of the diseases of civilization.

This same article proceeds to make a plea similar to our own. Observe the recommendation for the scandalous situation it has described.

Much of this situation results from our having forgotten nature. As an example take the healthy appetite. It is an extremely sensitive biological mechanism which, if it is not perverted or seduced, can protect us from overnutrition, undernutrition, malnutrition, avitaminosis, and other nutritional ailments, without the need of our becoming chemists, calorie counters, apothecary jugglers, or vitamin and food faddists. We also have muscles and they beg for exercise. But they don’t get exercise in this push-button and car-transported civilization of ours. Hippocrates, the father of medicine, said a long time ago – almost twenty-five centuries ago – that use leads to health and disuse to disease and premature disability.

To Hippocrates, the first step in restoring or maintaining health in a person was *regimen*.... He was concerned with the work, rest, eating, sleeping, and recreation of the patient. He had a sound approach to the whole person because he recognized and accepted the psychosomatic nature of man. He also knew that nature did the real curing. That is really why regimen was so important to him. That was his first line of attack. His second was medicinal. And if those two failed, he turned, when indicated, to surgery as a final recourse.

In this plea for intelligent preventive medicine we would like to underline the significance of the emphases by Hippocrates. The very word “physician” comes from a Greek root which means “nature.” The tradition of medicine at its best has always recognized nature as the primary physician in any case. The doctor's role is to assist and support nature. It is a great insight indeed to learn that most diseases are self-limiting, that is, the body itself cures most ills, not the doctor. What Walter Cannon, the Harvard physiologist, long ago called “the wisdom of the body” is what does the healing, though some human professional may get the credit. The word “doctor” actually means “teacher,” but the typical doctor has no time to teach, so distributes prescriptions instead. And the average patient does not want to be taught. “Give me a quick fix” is his plea. For such folly a terrible price must ultimately be paid.

May we say it again, for your sake? Preventive medicine is the best medicine. Some minutes or cents rightly used per day, now can accomplish what years and thousands of dollars later will fail to do. Choices now made as to life-style will do successfully what the wisest of decisions years later can never do. A fence at the top of a precipice is a thousand times better than an ambulance at the foot. Modern medicine as traditionally practiced is the ambulance method of disease control. There is a better way, a way that reduces the pain of the world. The following pages you are about to read describe that better way in such simple terms this book will prove to be worth more than a million to some sufferers.

**SUMMARY**

Nearly one-third of the population suffers from chronic pain.

Medical science is yet very limited in dealing with pain.
Prevention of disease is the best way to avoid pain.  
Half of those over forty have one or more chronic diseases.  
Hospitalization often adds to the pain of the sick.  
Two million people a year contract new diseases in hospital and nearly 100,000 die as a result.  
Modern medicine practices the ambulance method of disease control, but the fence at the precipice edge is preferable.

REFERENCES

2. *Ibid*.,
3. *Ibid*.,
6. *Ibid*.,
CHAPTER 2

How Healthy Are You? (Part One)

However conscientious your doctor, however efficient the hospital staff however up-to-date the medical technology, however appropriate the drugs used, all involvement in medical therapy is dangerous. For starters, remember that as with ministers, lawyers, politicians, there are only a minority of outstanding physicians. According to recent reports in Time and Newsweek, the problem of medical incompetence is widespread and is accompanied by a deliberate lack of discipline and surveillance. Despite the Hippocratic Oath, few doctors protest against malpractice by fellow doctors. Thus medicine, as with religion, law, government, is based on fallibility, error, and ignorance. All contact with it is a gamble and the stakes are life and death. Therefore, it is worthwhile checking out one's own state of health in order to reform one's habits and practices, and thus, be only rarely dependent on professional medicine.

He who has health and has no debts is rich enough.

Check up or Check Out!

It was not a mere verbal flourish when the recent Consumer's Guide to Medical Care was entitled Take Care of Yourself. You'd better. If you don't, who will? Keep in mind there's a real distinction between faith and presumption. Augustine said long ago, "Without him [God] we cannot; without us he [God] will not." Remember the word responsibility implies our response to his ability. Our response is called for every step of the way.

Every Christian would do well to remember frequently that "an ounce of prevention is worth a ton of cure." It is not only true that "a stitch in time saves nine," but it is also true that once there's a hole in the dike of health there may soon be a flood and drowning. It's true that if you unwisely delay a visit to the doctor when you really need to go, you may pay for your folly. And if you go unnecessarily, you enter a realm filled with the dangers of faulty diagnosis, prescription and therapy. Later chapters will offer some suggestions on this dilemma.

Don't Blame the Doctor

And the doctor is not to be blamed. It's just in the very nature of the thing. The price of disease involves inevitable risk, however conscientious your doctor, however efficient the hospital staff, however up-to-date the medical technology. Use all three when necessary, but practice preventive medicine. You can then avoid at least three-quarters of the dependence and danger of such situations. Remember "70 percent of diseases are diseases of choice."

There is a great change in medicine today. Leading specialists are demanding that people be educated regarding their own responsibilities. Conscientious doctors are well aware of the dangers that are inevitably encountered when sickness strikes. However, not all doctors are conscientious, any more than all ministers are, or all accountants, or all bakers. According to Time magazine of May 26, 1986:

In recent years the number of studies of widely publicized malpractice suits have spotlighted the problem of medical incompetence and, particularly, the lack of discipline and surveillance.

In an earlier medical report, Time magazine declared:

Patients have long been aware that doctors sometimes kill as well as cure. Doctors have long insisted that medically-caused mishaps do not occur in significant numbers. Now two medical research teams in Boston have challenged that assumption. One team, led by geriatrics specialist, Knight Steele, found that out of 815 patients admitted during five months of 1979 to a hospital at the Boston University Medical Center, 290 suffered almost 500 medical mishaps. More than 200 of these complications were due to drugs. An additional 175 resulted from other treatments or diagnostic tests. These mishaps contributed to the death of 15 patients.¹

We repeat, don't make the mistake of blaming physicians in general, or the practice of medicine. We have every reason to be grateful for competent physicians and the progress of modern medicine. But let us not be Pollyannas, thinking that in this one field alone all things are well. Medicine, as with all other human pursuits, is laced with fallibility, error, and ignorance. All contact with modern medicine is a gamble, and the stakes are life and death.²

Which leads to the question "How healthy are you?" It is vital that each person should take stock of his own condition and find warnings from his own body before he receives ultimatums from a physician of surgery. The health should be as carefully guarded as the character, and nothing pays off so well as the time that is given to the preservation of physical, mental, and spiritual well-being. If we don't take time to be healthy, soon we will be forced to take time to be sick. Which will you choose?

The Twelve Minute Test

The famous physician behind modern aerobics, Dr. Kenneth Cooper, has given us an excellent test to estimate how fit we are. Obviously, it is not a test that makes manifest all our weaknesses, organic and otherwise, but it is a generalized test of our overall well-being. The test is simple -- how far can you cover in twelve minutes by foot? If you are under fifty years of age and are in excellent condition, you should be able to cover a mile and a half by jogging. To the degree that you cannot do that, you fall short of the criterion of excellence.

If you have not been in the habit of exercising vigorously, don't make the mistake of enthusiastically going "all out" to prove a point. Sudden vigorous exercise, prolonged, can be dangerous. So as you do the above test, listen to your body, and walk
rather than jog if your body gives you signals. Pain in the chest, dizziness, stomach pain, breathing difficulties, light-headedness, are all warnings that must be heeded.

**DEATHS FOR SELECTED CAUSES AS A PERCENT OF ALL DEATHS: UNITED STATES, SELECTED YEARS, 1900-1977**

![Graph of death causes]

**NOTE:** 1977 data are provisional; data for all other years are final.

Source: National Center for Health Statistics, Division of Vital Statistics

Don't come to a dead stop at the end of your twelve minutes. Athletes always warm up and cool down. Five minutes of lighter activity before and after your exercise is advisable. Five minutes after you have ceased your vigorous activity, count your pulse rate. If it's above 120 beats per minute you have overdone it. If after another five minutes you find that your breathing rate is more than 13 to 16 per minute, this will corroborate the results of the first test. Such results show that you are not in good shape. You are not fit. On the other hand, if you pass both tests, you have probably been moderately active over a long preceding period, and your body is in good shape for exercise. This does not guarantee the condition of all bodily organs, not even the condition of your heart, but it's a good sign, pointing in the right direction.

Obviously your age is an important factor as you measure your present condition of fitness. For example, exercise physicians speak about a maximum heart rate, which is 220 less your age. Between 70 percent and 80 percent of that figure is what is known as the target-training rate. It is not wise to exceed 80 percent of your maximum heart rate unless you know yourself to be very fit indeed.

If you don't feel up to the twelve-minute test, take a test of five minutes or a little longer. Ideally, your range of performance should be about 140 to 270 yards per minute for a healthy male, and 120 to 220 for a healthy female. If you are under sixty, and a male, and can cover 1,000 yards in five minutes, your fitness level is fair. If you are more than sixty that achievement is good. For younger men, at least 220 yards per minute should be covered. For a woman in her twenties, 200 yards per minute is good, but excellent if she's in her fifties.

Observe there are also other tests including curl-ups, push-ups and the step test. We give some particulars in an adjoining chart.

**The Mirror Test**

An easier test can be done in the privacy of your bathroom, stripped naked, before a full-length mirror. If you look fat, you probably are. Obesity and fitness don't go together. For males, a healthy fat percentage should not exceed 25; for women 30. Physical-culture experts in your own city can estimate your fat content by underwater weighing. College athletic departments, and some reducing clinics, have underwater weighing facilities. If you don't want to go to that bother, remember that in fresh water, if you are floating without difficulty, your fat content is probably greater than 25 percent, whereas if you float only with your lungs full you are about 22 percent fat. Should you sink slowly in fresh water, even with your lungs full, you are under 20 percent fat, but if you sink in salt water with your lungs full, you are 13 percent fat or less. These are, of course, just approximates.

There are other simple methods of estimating whether one is overweight. A very simple one is just to pinch the skin of the triceps muscles at the back of one's upper arm. Seize the flesh between thumb and forefinger, and if the distance between the fingers is more than half an inch, one is heavier than ideal. Then there is the ruler test. Lie on the floor on your back, place a ruler on your abdomen pointed towards your toes, with the middle of it at the naval. If you are not obese, the ruler will remain parallel to the floor rather than tipping up at the lower end. Another simple test is for a male to take his tape measure and measure the inches around the upper chest under the armpit when his chest is relaxed, and compare it with the inches...
measured around his waist. Ideally there should be about a 5-inch difference. Anything less than the 5 inches shows a tendency towards overweight.

In the words of Scripture, "It is not a vain thing... it is your life" (Dt 32:47). Once you have gone beyond 10 pounds above your ideal weight, every additional pound costs you a month of your life. In addition to that, your additional weight will slow you down, impair your self-image, and interfere with your personal relationships. Those who are grossly overweight have more hospitalization than those of normal weight – hospitalization often involving gallbladder problems, heart problems, and many other problems. Overweight people face more difficulties and dangers when they have surgery.

Before the age of fifty, about half the women, and one-third of the men, in the U.S., are considerably overweight. Even in those who seem to have preserved their same weight from their twenties, muscle has been replaced by fat, to a degree. It is chiefly a matter of imports versus exports, that is, calories consumed versus calories spent. When more energy is taken in by eating and drinking than is spent in physical activity, the inevitable result is overweight. Most people put on an extra pound or so a year, once they leave their twenties. This is a very common but exceedingly hazardous practice.

Another test you can do upon yourself is the resting pulse test. If your pulse is very fast while you are resting, and that is characteristic of you, it may be a sign of a weak heart. The efficient heart pumps more with each beat than the weak heart. In exceptional athletes, the resting rate of the pulse can drop down to as low as 35 beats per minute. Usually, the typical pulse rate at rest is about 70 for men, and about 80 for women. Make your test when you wake in the morning, not after eating or exercising, or while on medication.

The Ammeter Test

What I call the ammeter test is, in some respects, the best guide to your nervous condition, and the amount of stress in your lifestyle. In older cars the driver watched the ammeter to see how the battery was functioning, whether it was discharging too much, or whether it was charging acceptably. In the ammeter test we look at the powerhouse of your personal battery to see whether you are charging enough vitality, or discharging too much. To that end, let me list for you some symptoms which, individually, don't mean much; but if you have a cluster of these much of the time, then your ammeter is reading the wrong way. Remember, all of us experience some of these symptoms occasionally, and a problem exists only if we get them in clusters, frequently. If you find that all these things are characteristic of you, your resistance to disease is being lowered, and inevitably your health will soon take a nosedive. Here's the list:

1. Irritability, without known reason.
2. Difficulty in concentration.
3. Failure to remember names.
4. Indigestion constantly.
5. Headache.
6. Chronic fatigue.
7. Mild depression.

Remember, none of these in isolation means anything significant, for every normal person suffers from them occasionally. But if you have most of them, most of the time, the ammeter reading is negative. Most people who are bothered by a cluster of these symptoms treat the symptoms instead of the cause or causes. That is folly. Don't make that mistake. It's no use striking at the tentacles of an octopus, you must aim at the heart. The following chapters will give you practical guidance regarding the changes you need to make to save yourself from pain and premature death.

Summary

Leading specialists in the medical profession tell us that doctors sometimes kill as well as cure. In a typical Boston hospital, more than a third of the patients admitted over a five-month period suffered approximately 500 medical mishaps.

In view of this, it's a great time for defensive living. Every sane person should check up on their state of health and take the steps needed to guarantee, as far as is humanly possible, avoidance of unnecessary disease.

Start with the twelve-minute test. How far can you cover in twelve minutes by foot?

Take the bathroom mirror test. If when stripped you look fat, you probably are. And remember – obesity and fitness don't go together.

Check out your resting pulse rate. Males in good shape should be around 60 and women 65-70.

Take the ammeter test.

REFERENCES

2. See Medical Care Can Be Dangerous To Your Health, Eugene D. Robin.
CHAPTER 2

How Healthy Are You? (Part Two)

When people forget that the universe is causal and not casual they pave the way for pain and disease.

Check out the pattern of your daily program. How many habits in it are capable of triggering disease? How many habits will contribute towards the prevention of disease?

* * * *

Joy, temperance, and repose
Slam the door on the doctor's nose.

Longfellow

* * * *

Health is the first wealth.

Emerson

Chaos or Cosmos – Your Choice!

The universe is not casual, it is causal; and the reason most people are miserable and unhealthy is because they live at a venture – they live by their feelings and not by law. For this universe is made by the divine Lawgiver to run by law. It is a universe, not a multiverse. The universe is orderly, and the atoms march in tune. We have to get in tune with the atoms, in tune with the infinite, in tune with God and nature – by obeying law. Obedience and blessing go together.

A Test to Do in Your Head

Now let me suggest a test you can do without moving. I do not want to encourage you to pursue many things that can be done without moving, for being still is next to being dead. But here's one you can do if you are lying awake in the early morning, or even if you are driving on a road that's not busy. Think through your habits. Go over your typical day. What do you eat, what do you drink, do you smoke, how many hours do you spend with God and his Word? How long do you sit before the TV set?

A Test to Do in Your Head

Now let me suggest a test you can do without moving. I do not want to encourage you to pursue many things that can be done without moving, for being still is next to being dead. But here's one you can do if you are lying awake in the early morning, or even ten minutes, after a meal. It is better still if you can do it

A Test to Do in Your Head

Let us become even more specific. What do you normally have for breakfast? How much of it consists of fresh, uncooked foods? What about lunch? and supper? What portion of your food is unrefined? Do you eat wheat bread or white bread? Do you eat abundantly of fresh fruits and vegetables? Are you light on fatty foods and animal products? Do you eat between meals? How often? And what do you eat when you eat between meals – is it something sweet? Is it something from a package, or a can, or a bottle? Or is it a piece of fruit? How often do you eat salads? What do you use as a salad dressing? What is your favorite drink? Does it contain sugar? Does it contain caffeine? Does it contain alcohol? How often do you get out of breath? How often do you perspire overly because of activity?

How Perfect Is Your Day?

How should you measure your answers? Well, let's consider the ideal day. An adult should rise after having had between 6½ and 7½ hours sleep. You should drink at least one to two glasses of water about half an hour before breakfast. Your breakfast should consist of at least a third to a half of fresh foods such as fruit. The grains you partake of should be whole grains such as whole meal bread, oatmeal porridge, or brown rice cereal, free of refined sugar. If you choose a cooked entree, it should be simple, and not spiced or heavily laden with salt. You should not eat in a hurry. And neither should you immediately sit down after eating to remain in a sedentary position for hours. Ideally, one should move about after a meal from 15 to 30 minutes before engaging in intense mental activity, and wait at least an hour or so before heavy physical activity.

Your work for the day should be in an atmosphere that is comparatively unpolluted, as much as possible in the region where you live. There should be a good circulation of air, and natural lighting is to be preferred to fluorescent. If you are doing close work, it is wise to look up and far off frequently. Never sit for longer than an hour. Find an excuse to get up and move around. If you are weary by noon, it would be beneficial if you could stretch out somewhere (even in the back of a car), for a quarter of an hour, or even ten minutes, after a meal. It is better still if you can do it before the meal.

If you are going to be sedentary all afternoon, the midday meal should be light, including fruit and salad materials, and perhaps a sandwich. Again in the evening, if you feel exhausted, it would be wise to rest before eating. And remember, you must find some time for physical activity. If you haven't gained such in the normal prosecution of your work, you must make time for it. Those that do not take time to exercise, have to take time for being sick. The evening meal, if it is a hearty one, should be taken several hours before retiring. Again, the atmosphere in which you dine is important. Eating when emotionally disturbed or physically exhausted leads to indigestion. A walk on top of supper is much to be preferred to sitting down before your television.

As a rule, the labor of the day should not be prolonged into the evening. Learn to obey the hints of nature. God begins to draw the blinds at sunset, and the rest of the evening is best spent as a family affair. Compare your habits with such an ideal, and you will be able to predict your future.
If your diet consists chiefly of refined foods, heavy proteins and fatty fare, by the time you are in your forties (in most cases), there will be a dangerous build-up that could erupt. You will receive a medical diagnosis that will bring discouragement, fear and heavy expense. On the other hand, if you are physically vigorous each day, sleep well, are happy at your work, and eat mainly unrefined foods, the prognosis for you is generally good.

**These Tests Also Can Predict Your Future**

There are hosts of other minor tests that one can do to estimate one's physical condition. While resting, count the number of breaths you take each minute. If it is regularly beyond ten, you are probably not in good shape. Folk with a good vital capacity take about six to eight breaths per minute. An average, however, is about ten. The condition of your teeth and gums is also a good reflection, in most cases, of general health. The inhabitants of most industrialized countries begin to get gum disease after their forties because of the nature of their diet. Refined, soft foods pave the way for periodontal disease and the loss of teeth. Foods that require thorough mastication like raw carrots and whole grains build up the health of the gums and teeth.

The eyes, also, are very often a mirror of the body. If you wear glasses, at what age did you begin to wear them and for what reason? Diet and physical activity have a great deal to do with the health of the eyes. We are generalizing, of course, for there are unusual circumstances due to heredity and environment that can be responsible for eye troubles at an early age, without any fault of the person concerned.

There is a simple skin test to measure the vitality of your epidermis. It is not infallible but it is helpful for most. Pinch the skin on the back of your hand and let it go, and count in seconds the time it takes to return to normal. If you are very young it should spring back immediately. The length of time required is a good estimate of your age physiologically. For some very elderly people it may take up to twenty seconds for the skin to be back to normal.

The most obvious test question to be asked of course is: Do you use tobacco? If so, almost certainly you can't read, or you are among the 90 percent that are addicted and would like to quit but think they can't. The smoking habit is usually linked with other bad habits and therefore is an indicator of evil to come. The best single thing you can do for your health, apart from the general principle of Matthew 6:33 (seek ye first the kingdom of God), is to abstain from smoking.

Having mentioned a Scripture text, we feel free to give now a religious test. Do you continually pray about the things that concern you? Do you give thanks many times a day for small or large blessings and ask counsel many times a day for problems small and great? Have you formed the habit of trust in God? Do you study the Bible daily to gain spiritual strength? Are you on the lookout for opportunities of Christian service? That person who is God-centered and yet outgoing has the universe on his or her side. It will do more for health than anything else. Mature Christians are tempted to worry, to depression, to anger, to gluttony, to impurity, like everybody else. But they know the way to victory. They have learned to trust and obey. Thus, they save themselves from a multitude of evils, including a multitude of health problems. Consider the following passages from Moffatt's translation:

A mind at ease is life and health, but passion makes man rot away. (Pr 14:30)
A glad heart helps and heals: A broken spirit saps vitality. (Pr 17:22)
Banish all worries from your mind, and keep your body free from pain. (Ec 11:10)
Some, weakened by their sinful ways, were sick and suffering through evil doing; they had a loathing for all food, on the verge of death. (Ps 107:17, 18)
See, you are well and strong; commit no more sins, lest something worse befalls you. (Jn 5:14)
(See also 1 Cor 11:28-30; Is 58:10, 11; Is 40:31; Pr 23:29-32; Ec 10:17; Pr 23:1-3; 1 Cor 10:31; 1 Cor 3:16, 17; 1 Cor 6:19, 20.)

True religion leads to temperance, which is the resolute avoidance of all things harmful, and the moderate use of all things good. Even the ancient Greeks knew that moderation was the condition for health. Twenty-seven centuries ago the Greek poet, Hesiod, wrote these words: "Fools not to know that half exceeds the whole, how blessed the sparing meal and temperate bowl!"

Finally, test yourself by the four chief requisites for longevity: Work satisfaction, a happy attitude towards life, physical agility, and abstinence from tobacco.

Better still, add alcohol to tobacco, for alcohol is the worst drug known to man. Worst in the sense that its widespread use adversely affects more lives. In this country one in every three families has a problem with alcohol. When you keep in mind that an alcoholic is fifty-eight times more likely to suicide, and his risk of contracting other diseases is also multiplied, it is not hard to see the reason for prizeing the virtue of abstinence (or, second best, moderation). The peril with moderation is, of course, that about one in every ten people who first touch alcohol will become an alcoholic – and no one knows which one of the ten it will be.

We hope you are not too discouraged by these tests. Whatever the outcome, remember you can yet improve every day that remains to you. Even in people sixty years of age and older, two months of proper living, by way of right diet and adequate exercise, can bring a tremendous improvement. Mrs. Hulda Crooks took up jogging when she was nearly seventy years of age. She is now world renowned for her mountain climbing in her nineties. But you would be well advised to have a physical examination before following that good lady's example if you, yourself, are advanced in years or have any known health problems.

**Your Most Important Statistics**

The most important single medical test is the blood pressure test. The most important statistics in the world for you are the numbers that come from that test. High blood pressure results in more deaths than any other single cause. Of course, it is
Overweight is chiefly a matter of consuming more calories in food than are spent in exercise. Usually the figures of 130/90 are seen as the borderline between normal and abnormal pressures. Actually the nearer one is to 110/70 the better. The so-called norm of 120/80 does not yield the longevity results of 110/70. Be aware that no single measurement of blood pressure is necessarily accurate in itself. What are needed are several measurements on different occasions. No measurement taken after exertion, a heavy meal, when excited, worried, or physically stressed, is accurate. Many of us find the mere confrontation with a medical worker is enough to send our blood pressure up by many degrees. The equipment is readily available for purchase if you wish to take your own blood pressure. Many drug stores have equipment you can use for a small charge. The best time to do it is when you wake in the morning. Take it for several days and estimate the average figures.

The next most vital statistic for you is your cholesterol rating. This is one you cannot do yourself. Such a blood test need not be frequent, but should be taken in one's twenties, thirties, forties, and fifties. We append a chart that gives information in this respect. Cholesterol exists only in animal products, and the best way to reduce cholesterol is to reduce your intake of meat, eggs, and dairy products.

Other tests that physicians generally recommend include a mammography for women, and colon tests for men. In the case of mammography it is still debated whether these are best taken during the forties, or early fifties. One thing is certain, be absolutely sure that the test is done with modern, up-to-date equipment operated by an experienced radiographer. Some question the value of the colon test, preferring to watch for symptoms first, but others feel the test should be taken in one's fifties. A mammography, if taken at all, is probably best reserved for this age.

Best of all, know that God loves you whatever the mistakes of the past. He who feels even a sparrow's fall has numbered the hairs of your head. 1 Peter 5:7 counsels us "Cast all your cares upon him for he careth for you." The same Christ who once passed through villages as the great healer, leaving behind not a single pain or moan, is bending over you in love this very hour. To believe that gives you health of mind and contributes significantly to health of body.

**SUMMARY**

Happiness and health are for those who obey natural law. What are your habits of eating, drinking, sleeping, exercising, and thinking?

Do you eat mainly fresh whole foods, chiefly of vegetable origin? Do you have a hearty breakfast? Do you refuse to eat between meals? Do you have a light supper? Do you avoid refined, fatty, and salty foods most of the time?

Do you get between seven or eight hours rest each night? Do you remember to take small vacations during the day away from pressure, even if only for a few minutes?

When you pinch the skin on the back of your hand and let it go, how many seconds does it take to return to normal? The quicker it springs back the better your physiological age.

Do you use tobacco? If you do, it must be because you don't read or you don't care about pain and early death.

Do you pray habitually about the things that concern you? And do your prayers include thankfulness for blessings large and small? Do you make it a habit to trust in God? Do you study the Bible daily?

Test yourself regarding the four chief requisites for longevity: Work satisfaction, a happy attitude toward life, physical agility, and abstinence from tobacco.

The most important single medical test is the blood pressure test, and the most important statistics in the world for you are the numbers that result. Healthy people should not have their blood pressure rise beyond 120/80 regardless of age.

What is your cholesterol rating? Ideally it should be between 150 and 180.

Continued health is possible only to those who are continually vigilant.

However conscientious your doctor, however efficient the hospital staff, however up-to-date the medical technology, involvement in curative medicine is always risky.

Medical specialists are warning us more than ever before about the dangers of iatrogenic and nosocomial diseases, that is, physician-induced and hospital-caused illnesses.

Medicine, as with all other human pursuits, is laced with fallibility, error, and ignorance.

Nothing pays so well as the time that is given to the preservation of physical, mental, and spiritual health.

Those who do not take time to be healthy, soon will be forced to take time to be sick.

A simple test of fitness is: How far can you travel by foot in twelve minutes? One and a half miles is the ideal.

If you look at your naked self in the bathroom mirror and you look fat you probably are.

If you pinch the skin of the triceps muscle at the back of the upper arm between thumb and forefinger and find that the distance between your fingers is more than half an inch you are overweight.

The tape measurement around the upper chest, for men, should be about 5 inches more than the measurement around your waist.

Once you are ten pounds above your ideal weight every additional pound costs you a month of life. Overweight is chiefly a matter of consuming more calories in food than are spent in exercise.
Your habitual resting pulse rate is one of the very best tests of fitness.
When the following symptoms are regularly clustered in your experience it may indicate you are nervously depleted: frequent irritability, difficulty in concentration, continual failure to remember names, regular indigestion, recurring headache, chronic fatigue, mild depression.

A careful examination of your daily habits should show whether you are headed for the mortician or a ripe old age.

REFERENCES


We recommend the books of Dr. John A. McDougall for splendid coverage of modern knowledge of nutrition. In the above list we have drawn from his comprehensive bibliographies.


CHAPTER 3
Why Do So Many Christians Choose to Be Sick? (Part One)

Not one in ten people over forty is physically fit. More than half past the age of forty have one or more chronic diseases. While some diseases have a hereditary origin or are due to environmental factors beyond personal control, it remains true that 70 percent of diseases are diseases of choice. For most of us it is true that we are what we are because we have been doing what we have been doing. For example, most obesity is the result of wrong habits of diet or a sedentary life-style. And once one is ten pounds over one's ideal weight, each additional pound costs a month of life. Remember that all of modern medical genius can only contribute on an average about 10 percent to an individual's health. Therefore, it is with good reason that the Bible which endorses diagnostic and curative medicine, puts its primary endorsement on preventive medicine.

* * * *
Many adult health problems today – it bears reemphasizing – can frequently be controlled by the individual. And the measures required are often not particularly dramatic. An individual's risk of disease can be substantially reduced (or increased) by a few simple personal decisions with respect to smoking, alcohol use, diet, exercise, seat belt use, and periodic screening for major diseases such as high blood pressure and cancer.

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Beginning in early childhood and throughout life, each of us makes decisions affecting our health. They are made, for the most part, without regard to, or contact with, the health care system. Yet their cumulative impact has a greater effect on the length and quality of life than all the efforts of medical care combined.

Ibid., p. 119.

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Man is in trouble. He is trapped in the web of his own technological triumphs. Never before has he known so much of both his inner mechanisms and his outer world. Never before has he been so oppressed by the imbalances between them.

Benjamin A. Kogan, M.D., Dr. P.H., Health, p. vii.

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Why should cities choose to be erected, if they are to be only the tombs of men?

Noah Webster

* * * *

Not One in Ten

What is the physical state of the Union, this "one country under God"? Millions have "fat-crippled hearts, alcohol-saturated brains and livers, tobacco-clogged lungs, accident-crippled bodies, and experience fatigue on ascending a flight of stairs." If World War III was declared tomorrow, about half or more of the young men called up would be rejected as unfit. Not one in ten people over forty could pass a fitness test. More than 50 percent have chronic diseases. For the considerable proportion of professed Christians in the undesirable categories just indicated, it is impossible to fulfill the Pauline injunction to "glorify God in your body" (1 Cor 6:20). They will die prematurely, "destroyed for lack of knowledge" in most cases, and unwittingly they will have robbed God and man of two or three decades of service.

Sin and Sickness

We hasten to add that while violation of natural law is sin, not all sickness can be linked with personal guilt. Hereditary and environmental factors beyond individual control are responsible for about one-third of diseases. The New Testament tells us that the greatest apostle of all had a thorn in the flesh, that another had many infirmities, and speaks of lesser-known Christians who were sick, even "nigh unto death," without any hint that sin was the cause (see 2 Cor 12:7; 1 Ti 5:23; 2 Ti 4:20; Php 2:27;). Church history offers the same testimony. Calvin had almost every disease in the book, and Luther was not far behind. Think also of Catherine Booth, Amy Carmichael, and a host of other spiritual giants who were for years restricted by constant illness. It is still frequently true, and we confess it again and again to our God in prayer: "He (or she) whom thou lovest is sick" (Jn 11:3).

Diseases of Choice

Having made this important point regarding a minority, we will venture to do as all who address the public in mass must do – speak in general terms. Even God is forced to do that. Had the Ten Commandments included every rational caveat associated with human behavior, instead of two tables of stone whose content can be put on a postage stamp, we would have had a book the size of Scripture itself, or perhaps a whole library.

Seventy percent of diseases are diseases of choice. This means that 70 percent of 500 billion dollars (our health budget) could be saved this country every year, if citizens were motivated by love to Christ to discipline their habits. Of the great mass of us, it is true that we are what we are because we have been doing what we have been doing. While all of us inherit about six bad genes which can, if in crucial places, wreak havoc of our health, for most of us there is a cause-effect relationship between our illnesses and our daily choices. As Dr. J. Knowles, President of the Rockefeller Foundation, has stated in Doing...
Better and Feeling Worse, "... Over 99 percent of us are born healthy and suffer premature death and disability only as a result of personal misbehavior and environmental conditions."¹

Surgeon General Koop has called on Americans to take personal responsibility for their health rather than trust primarily to medical curative procedures. This call is being echoed by other physicians, politicians and a host of thoughtful people. When one reflects on the fact that there can be a thirty-year difference between the life spans resulting from a good life-style and a bad one, our responsibility is obvious. The 1986 edition of The Consumer’s Guide to Medical Care says:

You can slow down your own aging. Almost every important aspect of aging can be modified, by you. The difference between biological age and chronological age can be as much as thirty years.²

Thirty years! And those thirty years can be the happiest and the most fulfilling.

A Frightening Picture

To support the contention of Drs. Vickery and Fries, consider the illustration offered by Dr. Farquahar of the Stanford Heart Disease Prevention Program. He writes:

We seem to become immune to horrendous events when they are commonplace. From this perspective, it is instructive to project our statistics concerning premature death and disability from heart attacks and strokes onto a more dramatic screen. Let us say that beginning January 1, two jumbo jets crash every day of the year, killing 501 people per day (359 men, 142 women). The average age is 58, with an age range from 30 to 65. At the end of the year the total number of premature deaths from these airplane accidents is 183,000. In addition, another four jumbo jets crash daily, extensively injuring 1,562 people per crash; after six months of intensive medical care, these crash victims are restored to only one-half of their preaccident health and mobility. These nonfatal crashes involve a total of 570,000 persons by the end of the year. The total cost in lost earnings and medical care is about $40 billion. (The cost is increased by $1.4 billion if we subject 70,000 people to bone transplants that result in 3,000 operative deaths, 10,000 serious cripples, and 58,000 individuals who are partially disabled.)

Had such death and disability occurred because of airplane crashes, we as a nation would have restructured our priorities well before the year was out. We would have been horrified that such dreadful death and injury could occur and would have asked what could be done to prevent its recurrence. But because death and injury from heart disease have increased gradually since 1900, it is not readily apparent that we are experiencing an epidemic, or indeed that we have adapted to living patterns that bring with them totally unnecessary cardiovascular disease and death.²

In further illustration of Farquahar’s point, let us consider what would be the reaction of the nation if the media suddenly announced that a mysterious disease was wiping out half the dairy herds and the beef cattle of this country. What an outcry there would be! What vigorous steps would be taken to meet the emergency! Yet, that is the situation with, not cattle, but humankind. May we offer a third illustration? Suppose we woke up one morning to find that half the adult population had overnight been mysteriously united to a concrete block of about twenty pounds weight or more, and that millions were forced to carry this everywhere they went. Would there not be a furor, rage and even panic? Yet that is the situation with national obesity.

Again quoting Vickery and Fries: “Once you are ten pounds over your ideal weight, each additional pound costs you a month of your life.”⁴

What does all this mean to a Christian who believes that he or she is the temple of the living God, and that whoever destroys that temple, that one shall be destroyed by God? (1 Cor 3:17). What does it all mean to those who acknowledge that they are not their own, that they have been bought with a price and that therefore they must present their bodies as living sacrifices to their Redeemer? How should Christians who believe in the command "Thou shalt not kill" react to the evidence that they are killing themselves, even if it is being done on the installment plan?

Technology and Our Health

The answer is obvious. Today, responsible physicians are acknowledging that the total array of medical technology and personnel can contribute, on an average, no more than 10 percent to an individual’s health. Says Aaron Wildavsky:

More available medical care does not equal better health. The best estimates are that the medical system (doctors, drugs, hospitals) affects about 10 percent of the usual indices for measuring health: whether you live at all (infant mortality), how well you live … how long you live … The remaining 90 percent are determined by factors over which doctors have little or no control, from individual life style (smoking, exercise, worry), to social conditions …, to the physical environment (air and water quality). Most of the bad things that happen to people are at present beyond the reach of medicine.⁵

One of the most recent and thorough works on longevity from the Stanford University School of Medicine agrees. We quote: Medical treatment is not the best way to approach current national health problems. The major chronic diseases (atherosclerosis, cancer, emphysema, diabetes, osteoarthritis, and cirrhosis) represent the major present health threat. They are deserving of continued medical research, and further advances are to be expected. But abundant evidence points to personal health habits as the main risk factors for these diseases. Preventive approaches now hold far more promise than do therapeutic approaches for improving human health.
The attainment of natural life is increasingly linked to personal behavior. Choices about diet, exercise, cigarette smoking, alcohol consumption, and drug compliance for hypertension are already firmly associated with health outcomes. The leading lethal diseases of the past have been effectively combated and are now being replaced by universal, chronic conditions which are not easily treated. Yet, much of the current health care system is focused on the diagnosis and treatment of these chronic diseases at the symptomatic stage, too late to affect outcomes decisively. In the prophetic view of McKeown (pp. xv-xvi), "Medical science and services are misdirected, and society's investment in health is not well used, because they rest on an erroneous assumption about the basis of human health. It is assumed that the body can be regarded as a machine whose protection from disease and its effects depends primarily on internal intervention. The approach has led to indifference to the external influences and personal behavior which are the predominant determinants of health."^6

This being the case, we are individually responsible to study to know how to live best to the glory of God, to learn which habits are to be cultivated and which are to be eschewed. In a nutshell, the Christian will be an advocate, a partisan, an example of preventive medicine. This should not be confused with popular holistic medicine which has become associated too often with a variety of questionable procedures and beliefs. Nor will it be linked with anything but gratitude for the marvels of modern medicine.

The Solution – Preventive Medicine

Dr. Denis Burkitt, who lectures around the world, discovered the malignant tumor that bears his name. In one of his lectures he shows a slide which pictures a hospital ward where doctors and nurses are mopping up water from the floor. Then the eye notices that a faucet attached to the wall is turned on full tilt. No one turns it off, all continue just to mop up the water. This is a fine example of the primacy of preventive medicine. Preventive medicine is turning off the faucet. A fence at the top of a cliff is a thousand times better than an ambulance at the foot. The platitude is entirely true which says an ounce of prevention is worth a ton of cure.

Let it not be thought that the vast improvement in average life span this century is the result of modern medical technology. Learned doctors again and again have told us that this is not the case. The improvement in longevity is the result of changes in nutrition and hygiene brought into practice before the golden age of medicine – before the turn of the century. Innumerable authorities could be quoted, but we content ourselves with two. Consider the following opinion of P. Conrad and R. Kern:

In general, medical measures (both chemotherapeutic and prophylactic) appear to have contributed little to the overall decline in mortality in the United States since about 1900 – having in many instances been introduced several decades after a marked decline had already set in and having no detectable influence in most instances. More specifically, with reference to those five conditions (influenza, pneumonia, diphtheria, whooping cough, and poliomyelitis) for which the decline in mortality appears substantial after the point of intervention – and on the unlikely assumption that all of this decline is attributable to the intervention – it is estimated that at most 3.5 percent of the total decline in mortality since 1900 could be ascribed to medical measures introduced for the diseases considered here.

... it can be shown convincingly, and on commonly accepted grounds, that the major part of the decline in mortality is unrelated to medical care activities, ...^7

This viewpoint is supported by Rene Dubos in *Mirage of Health*:

Because the decrease in death rates appeared obvious to everyone after 1900, scientific medicine and the germ theory in particular have been given all the credit for the improvement of the general health of the people. The present generation goes still further and now believes that the control of infectious diseases dates from the widespread use of antibacterial drugs. So short are medical memories! In truth the mortality of many other infections had begun to recede in Western Europe and North America long before the introduction of specific methods of therapy, indeed before the demonstration of the germ theory of disease.

Much statistical information is available to document the distant origins of the progress in the control of infection, but two examples will need suffice. The mortality caused by tuberculosis in Europe and North America has been falling continuously and almost at a steady rate ever since the middle of the nineteenth century. From a high point of approximately 500 per 100,000 population in 1845 the mortality had come down to less than 200 at the turn of the century and to 50 in 1945, a tenfold decrease. Yet no drug therapy was available during this period, vaccination was not practiced, and the few therapeutic procedures that were available had but limited value and reached only a very small percentage of the tuberculous population. The decrease in the severity of measles presents an equally startling picture. No technique of vaccination, no drug, no therapeutic procedure is as yet known to deal with this disease. Nevertheless, the accumulated knowledge of old, experienced physicians confirms the statistical information that the disease is much less of a problem now than it was a few decades ago. Clearly the monster of infection had been reduced to a shadow of itself by the time scientific medicine provided rational and specific methods for its control. The conquest of epidemic diseases was in large part the result of the campaign for pure food, pure water, and pure air based not on a scientific doctrine but on philosophical faith. It was through the humanitarian movements dedicated to the eradication of the social evils of the Industrial Revolution, and the attempt to recapture the goodness of life in harmony with the ways of nature, that Western man succeeded in controlling some of the disease problems generated by the undisciplined ruthlessness of industrialization in its early phase.^5

At last we reach our punch line. The Bible, which revolves around Christ, the great healer of body and soul, and which contains two books written by Luke "the beloved physician," endorses diagnostic and curative medicine, even prescriptions (Is 38:21), but its primary endorsement is for preventive medicine.

**SUMMARY**

Even the saints get sick, and sometimes it is through no fault of their own.
But, as a result of affluence and ignorance, millions in this country have fat-crippled hearts, alcohol-saturated brains and livers, tobacco-clogged lungs, accident-crippled bodies, and experience fatigue on ascending a flight of stairs.
Not one in ten people over forty could pass a fitness test.
About 2 percent of middle-aged people exercise adequately.
Ninety-nine percent of us were born healthy and our premature demise is usually the result of wrong choices.
Most people are killing themselves on the installment plan.
Choices about diet, exercise, cigarette smoking, alcohol consumption, and drug use help to determine how long and how well we should live.
Dr. Denis Burkitt was right – it’s much better to turn off the faucet than to spend one's time mopping up the water.
Improvements in longevity this century are not the result of medical procedures but of changes in nutrition and hygiene.
The vast majority of people suicide by life-style.
Christians should remember that violation of natural law is sin.
For most of us there is a cause and effect relationship between our illnesses and our daily choices.
The Surgeon General has told Americans that we can do more for ourselves and our own health than all the costly medical curative procedures in the world.
The infectious diseases were not eradicated by medical techniques but by preventive medicine involving improved diet, hygiene and housing conditions.

REFERENCES
1. Dr. J. Knowles, Doing Better and Feeling Worse, p. 79.
**CHAPTER 3**

**Why Do So Many Christians Choose to Be Sick? (Part Two)**

If people took seriously the Bible's emphasis on preventive medicine, the majority of pain and sickness could be avoided. If our Lord's example of refusing an unnecessary drug on the cross were followed, at least 50 percent of major modern illnesses could be wiped out.

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Nightly rest and daily bread, the ordinary use of our limbs, and senses, and understandings, are gifts which admit of no comparison with any other.

William Paley, *Natural Theology*.

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**The Promise of Health**

When God delivered a nation which was to be a pattern for all the redeemed, he instructed them that health would be the result of obedience.

> If thou wilt diligently hearken to the voice of the LORD thy God, and wilt do that which is right in his sight, and wilt give ear to his commandments, and keep all his statutes, I will put none of these diseases upon thee, which I have brought upon the Egyptians: for I am the LORD that healeth thee. (Ex 15:26)

This philosophy of health stands in strong contrast to the magical notions of health and disease that prevailed in surrounding cultures.

**The Biblical View**

In a remarkable article in the respected *Interpreter's Dictionary of the Bible*, R. K. Harrison asserts again and again that the Mosaic code represented "a considerable advance upon the medical concepts of other ancient Near Eastern peoples." We quote:

> ... the moral concepts of holiness contained in the law indicated a new approach to the problem of sickness. The emphasis was now laid on the prevention of disease rather than its cure ... the primary emphasis of the law in this respect was prophylaxis, and because of this unique therapeutic emphasis Moses may well be spoken of as the father of preventive medicine. In the medical enactments of the Pentateuch, social hygiene was elevated to the level of a science, and the precepts of the Mosaic era survive to the present as a model of sanitary and hygienic insight.

We recommend the whole article to every reader even if it is necessary to stand for twenty minutes in a public library to read it! Harrison does not contend that a hygienic purpose was the only intent behind every precept of the code governing personal habits, but he does stress that such was its primary significance. While no one can demonstrate health reasons, for example, for every instance of the division between clean and unclean animals, most civilized nations have followed the general trend of the Mosaic legislation for purposes of physical well-being, and in many cases the reasons are apparent, as Harrison shows.

A. Rendle Short's work *Modern Discovery and the Bible* is interesting on this topic, and also the volume by Dr. D.T. Atkinson, *Magic, Myth, and Medicine*. A popular paperback, *None of These Diseases*, while not infallible in all its contentions, is also worth reading. Early this century, Dr. Alexander Rattray published *Divine Hygiene, Sanitary Science and Sanitations of the Sacred Scriptures and Mosaic Code* – volumes considered as classics in the field. Another writer, James J. Walsh had this to say:

> The book of Leviticus, one of the very oldest religious documents that we have, contains a sanitary code which is a marvel of completeness in its prescriptions for the maintenance of health and the prevention of disease. It anticipates most of the modern discoveries in the matter and the faithful keeping of its regulations has made the Jew the powerful personal factor that he has been so often in history, notwithstanding the fact that he belonged to a despised subject race. The orthodox Jew has kept his health in spite of the unfavorable conditions in which he was placed, much better on the average than the Gentiles around him, and it is for that reason that his nation has been preserved.

Observe how the well-known specialist from Texas, Dr. Atkinson, (mentioned above) echoes Walsh and emphasizes the biblical stress on preventive medicine:

> In the Bible greater stress was placed upon the prevention of disease than was given to the treatment of bodily ailments, and in this no race of people, before or since, has left us such a wealth of laws relative to hygiene and sanitation as the Hebrews. These important laws, coming down through the ages, are still in use to a marked degree in every country in the world sufficiently enlightened to observe them. One has but to read the book of Leviticus carefully and thoughtfully to conclude that the admonitions of Moses contained therein are, in fact, the groundwork of most of today's sanitary laws. As one closes the book, he must, regardless of his spiritual leanings, feel that the wisdom therein expressed regarding the rules to protect health are superior to any which then existed in the world and that to this day they have been little improved upon.

Think of how much pain and sadness could have been avoided if society took the Bible's emphasis on preventive medicine more seriously.

To reinforce our contention regarding the importance of preventive medicine, may we point out that 20 percent of hospital patients come from the 10 percent of the community who are alcoholics, and a similar proportion of patients are hospitalized as a result of diseases induced or aggravated by the use of tobacco – lung cancer, emphysema, heart disease, etc., and that
approximately another 10 percent come as a result of a dangerous reaction to prescription drugs and self-medication. Thus, on one count alone—the abuse of drugs—preventive medicine could wipe out at least 50 percent of major modern illnesses.

Consider in this regard the admonitions of Scripture and the example of our Lord. "Do thyself no harm" (Acts 16:28). "Whether therefore ye eat, or drink, or whatsoever ye do, do all to the glory of God" (1 Cor 10:31). "Blessed art thou, — O land, when thy princes eat ... for strength and not for drunkenness" (Ec 10:17). "Give strong drink to him who is perishing" (Pr 31:6, in other words, opiates are only for those on the verge of death, or those in great pain). "Thou shall not eat any abominable thing" (Dt 14:3). "... eat what is good" (Is 55:2). "In the sweat of thy face shall you eat bread" (Gn 3:19). (No sweat, no bread. No exercise, no food.) "If any man does not work, let him not eat" (2 Th 3:10). It is Babylon the great which has a cup of drugs which she offers the world. (The Greek word for "sorceries" in Revelation 18:23 is pharmakeia and means drugs.) Our point is not against the legitimate use of valuable drugs as in anesthesia, pneumonia, sexually transmitted diseases, and many other valid cases, but against unnecessary and indiscriminate use. A recent thoroughly documented work by two authors including a doctor of psycho-pharmacology carries on its cover the following provocative statement:

   It is true that through vaccination some infectious diseases can be eradicated; that drugs provide effective therapy for previously fatal conditions; and that analgesia and anesthesia make life more bearable. The problem is one of perspective. Drug companies make money by selling drugs. Drugs have become the predominant force in health care, to the detriment of other approaches.5

   As a result of the way prescription drugs are used, iatrogenic disease, literally "doctor-caused" disease, but now most commonly disease caused by drugs, is an enormous and growing medical problem. When it appears, the usual answer is to prescribe for the unfortunate victim yet another drug, with its own hazards, for the new symptoms. Even under the specialized care of hospitals, perhaps as many as 28 per cent of patients suffer adverse reaction to their medication. Drug-induced disease leads to many deaths.6

Most significant of all is the record concerning our Lord when offered a drugged drink on the cross. "When he had tasted thereof, he would not drink" (Mt 27:34). Should not this example of self-discipline and self-denial be a powerful motivation for all Christians?

**Some Modern Problems**

Christians need to be intelligent in the matters we have discussed in this chapter. Not to know the truth in these areas invites trauma and loss. Consider, for example, the fact that in some districts the number of Caesarean deliveries of babies has doubled out of fear of malpractice suits. Consider how many doctors are almost forced by insistent patients to hand out unnecessary prescriptions lest the patient think the physician doesn't care and therefore he should go elsewhere. Think of the multitude of unnecessary medical tests urged upon patients because of the necessity of practicing "defensive medicine" in an age when the law is being invoked in such a way as to penalize the conscientious physician as well as the guilty. Think of the dangers implicit in even hospitalization — nosocomial diseases are multiplying at a fearful rate. Infection follows surgery in a dangerous state of affairs. And for the unfortunate victim yet another drug, with its own hazards, for the new symptoms. Even under the specialized care of hospitals, perhaps as many as 28 per cent of patients suffer adverse reaction to their medication. Drug-induced disease leads to many deaths.

**The Gospel and Our Health**

And what has all this to do with the gospel? It is not the gospel. But it is the fruit of the gospel. God is our Father, the most loving Father in the whole universe. He desires to lessen human suffering even here and now, but cannot do it without our cooperation. He says to us: "Beloved, I wish above all things that thou mayest prosper and be in health even as thy soul prospereth" (3 Jn 2). He is the one who not only forgives your iniquities but "healeth your diseases" (Ps 103:3). He pleads with us: "Do thyself no harm ..." (Acts 16:28). The battle against sin is much easier when waged by someone in good health. Read that again. It was Henry Ward Beecher who said that half the spiritual ills from which people suffer arise from a morbid state of health. When one is really sick, nothing else matters, and even Christians cannot fulfill their responsibilities. People in pain find it hard to love, or even to be patient.

Without adequate oxygenation of the tissues, especially the brain cells, to sustain the fires of life, it is difficult to think clearly, purely, lovingly or optimistically. That oxygenation is possible only to those who eat properly and are physically vigorous and obedient to the divine laws written upon the material world and their own physical frames.

The Christian physician is as certainly God's minister as any man ordained by human hands, but he is of double worth when he labors to prevent that which alone makes him necessary, he seeks to first of all prevent illness and only secondarily to cure it.

**SUMMARY**

In the first books of the Bible we find how social hygiene was elevated to the level of a science.

Twenty percent of hospital patients come from the 10 percent of the community who are alcoholics and a similar proportion of patients are hospitalized as a result of diseases induced or aggravated by the use of tobacco.

Drugs have become the predominant force in health care to the detriment of other approaches.

In recent decades iatrogenic disease, literally "doctor-caused" disease, has become an enormous and growing medical problem.

Modern problems include the fact that in some districts the number of cesarean deliveries of babies has doubled out of fear of malpractice suits. Similarly, because many physicians are wrongly attacked by greedy immoral patients, they are forced to practice defensive medicine involving a multitude of unnecessary medical tests that are both expensive and in some cases risky.
Nosocomial diseases (those contracted in hospitals) are multiplying at a fearful rate.
Half the spiritual ills from which people suffer arise from a morbid state of health.
The Bible endorses curative medicine but puts its chief emphasis upon preventive approaches.
The book of Leviticus contains the oldest and the best sanitary code.
Emphasis upon preventive medicine does not mean the nonuse of the blessings of modern medical techniques, but only the avoidance of unnecessary and indiscriminate use of drugs, surgery, etc.
Preventive medicine is certainly not the gospel, but it is part of the fruit of the gospel.

REFERENCES
5. A. Melville and C. Johnson, *Cured to Death*, p. 3.
6. Ibid., p. 5.
CHAPTER 4

Die Young – As Late As Possible (Part One)

Not so much being dead, but being half dead, is the thing to be avoided. Millions of people after their forties live the rest of their days half dead. God intended we should be fully alive until the end. A proper life-style adds not just to life’s quantity but its quality, prolonging as it does the vitality, enjoyment and productivity of the middle decades.

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... self-imposed risks and the environment are the principal or important underlying factors in each of the five major causes of death between age one and age seventy.

Marc Lalonde, A New Perspective on the Health of Canadians, p. 15

* * * *

... the following hypotheses which now appear sufficiently valid to warrant taking positive action:

1. It is better to be slim than fat.
2. The excessive use of medication is to be avoided.
3. It is better not to smoke cigarettes.
4. Exercise and fitness are better than sedentary living and lack of fitness.
5. Alcohol is a danger to health, particularly when driving a car.
6. Mood-modifying drugs are a danger to health unless controlled by a physician.
7. Tranquillity is better than excess stress.
8. The less polluted the air is, the healthier it is.
9. The less polluted the water is, the healthier it is.

Ibid., p. 58.

* * * *

Beware of Chronic Disease

In all preceding centuries until this one, the days, months, or years of sickness for most people averaged 1 percent of their lifetime. Now in the twentieth century the situation has changed. The average person now can anticipate spending about 10 percent of his or her lifetime suffering from illnesses that grow out of degenerative diseases. We quote one of the most thorough recent studies on longevity:

At the turn of the century, death occurred at an average age of 47 after an illness of only a few days. Less than one percent of the average lifespan was spent in terminal illness. Gradually, this figure has increased, with the emergence of chronic disease, so that a terminal illness taking up 10 percent or more of a lifespan is not unusual.1

And another study tells us:

While patients suffering from communicable diseases once filled most hospitals, treatment centers now serve mainly those afflicted with chronic ailments.

Many who would have died soon after contracting a disease now live and endure their affliction. Today most illnesses are chronic diseases – slow-acting, long-term killers that can be treated but not cured. A 1964 survey by the Department of Health, Education and Welfare indicates that about 40 percent of all Americans suffer from one or more chronic diseases; one out of every four so afflicted have lost some days at work because of disabling symptoms.2

Chronic Diseases Can Be Avoided

Who wants the humiliation, pain, and expense of being ill for years? This book is written to save you from that fate. Half the people after the age of forty suffer from one or more chronic diseases. As they continue to increase, these chronic diseases result in functional incapacity and ultimately in illness. Because over 95 percent of the toll of infectious diseases (not counting AIDS) has been eradicated in the western world, people nowadays do not die swiftly as a rule but inch by inch, day by day. It is for many not only a terrible tedium, but a protracted agony and continual embarrassment and sorrow. The good news of this book is that for most of us and for most of our loved ones this can be avoided. Medical science does know enough now to lengthen our years of vigor, and decrease our days of infirmity. "... Ye shall know the truth, and the truth shall make you free" applies physically and mentally, as well as spiritually. Christ came that we "might have life, and have it more abundantly" (Jn 8:32; 10:10).

Even after sin overtook the human race, it was God's plan that his children should lead active, happy lives, physically, mentally, and spiritually until the time came for him to give them rest. While the folly and ignorance of men has led them to violate natural law in such matters as hygiene, nutrition, and physical activity, and introduced infectious diseases and their terrible toll on human life; nonetheless, until our own century, protracted illness was a rarity. Read all the accounts of deaths that can be found in Scripture and observe that in almost all cases, ability and functional capacity was preserved until almost the very last day or days (see for example Gn 47:8-12; Jos 14:10-11). It is not so in our time.
Millions in the industrialized world pay for their prosperity and luxury with an attenuated life of greatly reduced quality for many years before death. This is an unmitigated tragedy that can be avoided. Even where that tragedy has begun to be enacted, there is much that can be done to change the situation. Even sufferers in their seventies can often be helped by the principles set out in this volume. When autopsies are made, in most cases it is uncovered that the dead have departed this life not because of a worn-out body, but because of one diseased organ particularly. The body physiologically as a whole can be aged sixty, but have blood vessels which normally might belong to an eighty-year-old. Or the heart may be in good shape but the kidneys or liver degenerate. The typical modern person is quite unlike the famous "one-hoss shay" that Dr. O. W. Holmes wrote about long ago, which remained usable in every part till the moment of ultimate and complete collapse.

The following pages heeded can enable you to be like Holmes' famous carriage. There is no need to follow in the wake of multitudes who die because ignorance of preventive medicine results in the premature and fatal degeneration of just one small but key portion of the human organism. Isn't that truth alone worth more than a million to the wise?

**The Bible Gives Priority to Preventive Medicine**

It is important to recognize that the Christian guidebook, the Bible, is a book that countenances diagnostic and curative medicine, but places its emphasis upon preventive medicine. It is the greatest book on preventive medicine the world has ever known. It deals with man as a psychosomatic unity, recognizes the pre-eminence of thought and emotion, and gives guidelines for physical habits which in the majority of cases will prevent degenerative diseases. The way of life advocated in Scripture is one of simplicity that recognizes the sacredness of the natural laws devised by the Creator. This way of life conforms to the pattern indicated in the opening chapters of Scripture and makes right use of the natural elements of creation, namely, the atmosphere, water, food, sunshine, and also society, physical activity, rest, and worship. More on that in the next chapter.

As mentioned in our introduction, there are certain pertinent truths for our time that we will repeat in this volume more than once because of their importance, for example:

1. Medical authorities are telling us again and again that 99 percent of us have been born healthy and that disease is a result of faulty habits or faulty environment. 2. At least 70 percent of diseases are diseases of choice. Even where heredity involves a significant bias towards illness and disease, it is usually our habits or our environment that pull the trigger for these. Disease is not casual, it is causal, it is not chance, but choice in most cases. 3. There is the potential of thirty years of extended healthy life in a wise life-style compared with the popular careless life-styles. 4. The most that modern medical personnel or technology can do for the average person is only 10 percent of what needs to be done for good health.

None of this is intended to suggest that every sickness should be accompanied by guilt. It is often true now as in Bible times that "he [she] whom thou lovest is sick" (Jn 11:3). In a world that because of sin has a polluted environment, where accidents take place, accidents of heredity and environment, none should try to apportion blame for another's illness. But we should do all we can to limit and restrict our own. For most of us it is true that what we sow we shall reap. Untold millions are sowing to the wind, and shall reap the whirlwind of sickness and tragedy resulting from violated natural laws.

Today it is not faddists, but medical scientists who are assuring us through government reports, that the major cause for many of our sicknesses and degenerative diseases is the diet we consume – a diet characterized by high protein, high fat, high salt and sugar, and refined foods where the fiber has been largely removed. In Third World countries where a refined diet is not usual, where the intake of fat is low, our chronic diseases are practically unknown. While it is true that the greater longevity of the West increases the likelihood of degenerative diseases, it is even more the fact that our unnatural diet is causative of most of our physical troubles. Only in this decade has this truth been irrefutably established. Yet millions live on in ignorance – no, millions die prematurely because of their ignorance, at least four out of every five adults in our western world.

At the turn of the century cancer took about one in every twenty-nine people. Now cancer claims at least one in five and by the end of the century the toll may be one in four. Cancer, of course, is particularly a disease of the old, and increased longevity has increased the cancer rate, but such is not the entire cause. At least 80 percent of cancer can be avoided according to the World Health Organization and the cancer researchers of the world. One bad habit alone discarded, that of the use of tobacco, reduces our chances of cancer by more than 30 percent. If we add to that the avoidance of both refined foods and a high-fat, low-fiber diet, we have reduced our cancer chances by at least as much (and perhaps twice as much!) again.

We have said that at least one in every five people will die of cancer and for the most part unnecessarily. The situation is worse with diseases of the circulation. Diseases of the heart and blood vessels take 50 percent of lives in the western world. More than one out of the average family will die of cardiovascular disease, and at least one will die of cancer and again we add – for the most part unnecessarily. Heart and circulatory diseases destroy as many as all other causes combined, twice the number taken by cancer, and the two combined account for at least 75 percent of all deaths.

When the National Council on Cancer, and the American Heart Association warn us against diets high in fat, we should remember that in Bible times, God's people were told, "... You shall eat neither fat nor blood" (Lev 3:17). Undoubtedly there were symbolic reasons for this injunction but also health reasons. The New Testament does not forbid the eating of meat any more than the Old, but the ideal diet of Eden is that towards which we should all aim. That diet consisted of the products of the vegetable world – fruits, nuts, grains, etc. Meat is an essential food, but because it is composed primarily of fat and protein, which in high quantities lead to atherosclerosis and osteoporosis (for excessive protein and phosphorus reduces the absorption of calcium), meat intake should be limited.

Because for over twenty years now the public has been warned against eating excessive amounts of fatty foods, and because there has been a great emphasis on the need for physical activity, and a strong appeal to drop the smoking habit, the death rate from heart disease and strokes, though not cancer, has dropped by approximately a quarter. This means hundreds of thousands of lives saved in recent decades in this country alone. What a demonstration of the importance of preventive medicine – a demonstration on a nationwide scale with undeniable results!

**Disease Can Mean Not Only Pain but Bankruptcy!**
Did you know that medical costs are the leading cause of personal bankruptcy in this country? Much of this is unnecessary. For example, relatives permit the terminally ill to spend their final weeks in a hospital where all types of unnatural methods of prolonging life are being applied. Modern medicine strives to see how close it can get to the mortician and still keep the protoplasm wriggling. Let us not blame the medical establishment, however, for all of the waste of money, resources, and sorrow. Relatives should be wiser than to prolong the death agonies of one beloved. While euthanasia cannot be endorsed by Christians, neither should the modern practice of prolonging death be endorsed. Christians believe in prolonging life but not in prolonging death. Because of the present practice, a typical case of an aged father or mother spending several weeks in the hospital at the end of their days can result in medical bills of $20,000 or $30,000. It is all so unnecessary. Home care exists whereby qualified medical personnel call at homes and care for the ill at a fraction of the expense of hospitalization for terminal cases. All with aged parents should become intelligent about the excellencies of the hospice system. Second, repeated surveys have shown that many expensive medical interventions do not prolong life, and frequently destroy its quality.

... patients judged terminally ill may recover when treatment is withdrawn. Four patients in a surgical ICU were considered terminally ill. To allow them greater comfort in the remaining limited period of life, their doctors decided to withdraw all treatment except for intravenous fluid. No more drugs were given, no special treatments were permitted, no more tests were run. Two of the four patients rallied; their temperature became normal, they began to eat, regained some muscle strength, and were discharged home to lead some kind of productive life. This episode illustrates two important issues, both of which deserve emphasis: The potential error in defining a patient as terminal and the possibility that treatment itself may accelerate terminal illness.4

Hygiene, Not Medicine, Has Extended Life Span

In case some are still doubtful about the need of studying preventive medicine, may we say again that the abolition of infectious diseases this century did not have as its cause our modern medical inventions. It is agreed now on practically all sides, and a vast amount of research has been written up to prove it, that the reason we are no longer plagued by infectious diseases such as TB, typhoid, diphtheria, etc. is preventive, not diagnostic or curative medicine though such terms were not then known.

Improvements in hygiene and nutrition and housing did most to bring about the decline in the infectious diseases. This is even true of poliomyelitis which was already on a steep decline when the Salk vaccine was invented. Certainly we do have that vaccine to thank for the complete eradication of poliomyelitis in our time, but it is the exception rather than the rule regarding the infectious diseases. Medical measures known and understood by the beginning of the nineteenth century contributed to such things as the abolition of smallpox, but the overwhelming reason for the vast reduction of death from these century-old killers was the preventive medicine of improvement in nutrition, hygiene, and housing.

Consider another example. Nevada and Utah adjoin geographically, yet their death rates are vastly different. Those of Nevada are overwhelmingly greater than those of Utah. Why? Because of the difference in life-style between the majority of inhabitants of both states. The Mormon population of Utah, for the most part, avoids tobacco and alcohol and the use of illicit drugs. Mormons believe it is a Christian’s duty to care for health. In Nevada, drinking, smoking, etc. have long been prominent. The same truth is illustrated by the fact that Seventh-day Adventists, who are largely lacto-ovo vegetarians have a much lower incidence of prominent types of cancer.

The tremendous gain through the abolition of major infectious diseases, the 25 percent national drop in deaths from heart and blood vessel diseases, the obvious health advantages of conscientious Mormons and Adventists — all testify to the importance and pre-eminence of preventive medicine. Will you cash in on this new knowledge and thus give yourself that which is worth more than a million?

Summary

Until this century, the average time of infirmity before death was 1 percent of the lifetime. Now in the twentieth century the average is nearer to 10 percent.

Except for AIDS, not infectious diseases but chronic diseases constitute our twentieth-century problem. God intended that his children should lead active, happy lives until the time of rest in death. In most scriptural accounts we find that the ability and functional capacity of Bible characters was preserved until almost the very last day or days of life.

Ninety-nine percent of us were born healthy and most disease is the result of wrong choices or pressures of our environment.

There is the potential of thirty years of extended healthy life in a wise life-style compared with the popular careless life-styles.

The most that modern medical personnel or technology can do for the average person is only 10 percent of what needs to be done for good health.

The major cause for many of our sicknesses and degenerative disease’s is the diet we consume.

In Third World countries where a refined diet is not usual, or a diet high in animal foods, our chronic diseases are practically unknown.

The evidence for the superiority of preventive medicine is found in the fact that most major infectious diseases were thus abolished and the recent 25 percent national drop in deaths from heart and blood vessel diseases has the same cause. Similarly, the statistically demonstrated health advantages of conscientious Mormons and Seventh-day Adventists testify to the supreme value of preventive medicine.

Once hospitals were filled with patients suffering from infectious diseases, but now most treatment is for those afflicted with chronic ailments.

In other words, most sicknesses today are not brief acute problems as in other eras, but rather slow-acting, long-term maladies that are really incurable.
Biblical accounts of protracted illness among the elderly are very rare.
Even in an age of sin, it was intended that we should function well until almost the end.
Death was meant to be a falling asleep and not a protracted agony.
The major cause of most of our degenerative diseases is the diet we consume, a diet characterized by high protein, high fat, high salt and sugar, and refined foods.
We now know enough to be able to avoid at least 80 percent of cancer.
The Bible warns against eating animal fat. This does not mean it is forbidden to Christians but that its use should be minute.
Medical costs are the leading cause of personal bankruptcy in this country.

REFERENCES
1. James F. Fries and Lawrence M. Crapo, Vitality and Aging, p.94.
2. The Sociology of Health and Illness, p.139.
CHAPTER 4

Die Young – As Late As Possible (Part Two)

*Only in the last decade has there come overwhelming evidence regarding the causes and prevention of most of our chronic diseases. Many physicians have testified as to the futility of traditional approaches to human disease and the wisest of physicians today are hailing the new information on preventive medicine as the dawn of a new era.*

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Ill health, of body or of mind, is defeat ... Health alone is victory.
Carlyle

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He who has health has hope, and he who has hope has everything.
Arabian proverb

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May you live all the days of your life.
Swift

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All the things I really like to do are either immoral, illegal or fattening.
Alexander Woollcott

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Turn up the lights; I don't want to go home in the dark.
O'Henry

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The best doctors in the world are Doctor Diet, Doctor Quiet, and Doctor Merryman.
Swift

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Don't Depend on Medicine

Why do people choose to suffer the agonies of protracted illness year after year before their death and burial? Why should there be such unnecessary sorrow when knowledge exists that could prevent it? First of all, it is because of the fact that only in recent decades has the populace heard the message that the life-style set forth in Scripture is the life-style endorsed by medical experts at the end of the twentieth century.

It is only since the 1960s that warnings have become universal against a high-fat, low-fiber diet, and against smoking. Only in the 1980s has come conclusive evidence of the dangers of physical inactivity and the value of regular exercise. A recent medical report affirmed that walking five miles a day can reduce a person’s risk of death by 50 percent. We repeat, only in our own day has the evidence in favor of preventive medicine become overwhelmingly clear even to professionals in diagnostic and curative medicine.

It is now so obvious that the usual medical approaches are inadequate, that some physicians of high ideals have publicized their concern. Take this confession for example:

The general ethos of the medical profession ... had led me to believe that in most situations the doctor usually knows best what is good for a person, and that because he knows best he is the natural head of the health team and his word is, or ought to be, authoritative.

Trying to put into practice this ‘cult of the expert’ as a young GP led me into a lot of trouble and much personal distress ...

My life gradually became one long psycho-therapeutic session from morning to night, occasionally interrupted by someone with a sore throat or appendicitis. I was, in fact, learning to play God and my patients were encouraging me to play the part.

However, my constitution began to suffer, my blood pressure rose, my wife and child seemed to me to be more awkward every day and I began to use alcohol to try to escape from so many problems. Using/abusing alcohol caused me to have several road accidents which damaged other people and were very expensive.

... The thought kept coming back to me that I know now also disturbs the minds of the most senior and caring men in my profession: that for all the work and all the deployment of my time and energy and expensive modern medicine, so little seemed to be achieved.
The depressed women kept coming back for their antidepressants, the mentally handicapped children continued to have rotten educational opportunities. I seemed to have no effect at all on unhealthy ageing, accidents, heart and gut troubles.

My total impotence in all this gradually became evident to me, so that after nearly ten years of dedication to the study and practice of medicine I came to the point of wondering whether I was of any value to anyone. The answer seemed to be ‘NO’.1

Another doctor writes of his feelings about the dilemmas of the modern practice of medicine and we notice one author's comments in response:

The story of a physician trying to explain the dilemmas of the modern practice of medicine:

"You know," he said, "sometimes it feels like this. There I am standing by the shore of a swiftly flowing river and I hear the cry of a drowning man. So I jump into the river, put my arms around him, pull him to shore and apply artificial respiration. Just when he begins to breathe, there is another cry for help. So back in the river again, reaching, pulling, applying, breathing and then another yell. Again and again, without end, goes the sequence. You know, I am so busy jumping in, pulling them to shore, applying artificial respiration, that I have no time to see who the hell is upstream pushing them all in."

I believe this simple story illustrates two important points. First, it highlights the fact that a clear majority of our resources and activities in the health field are devoted to what I term "downstream endeavors" in the form of superficial, categorical tinkering in response to almost perennial shifts from one health issue to the next, without really solving anything ... one must be wary of the short-term nature and ultimate futility of such downstream endeavors.

Second, the story indicates that we should somehow cease our preoccupation with this short-term, problem-specific tinkering and begin focusing our attention upstream, where the real problems lie.2

Treason in the Medical Army

To refocus "upstream" by preventive medicine should now be our aim. Sadly, influential groups who should be in the vanguard are often in the opposite army. Consider this tragic allusion to guilty default on the part of the American Medical Association:

One of the most ironic pro-cigarette forces has been the American Medical Association. This powerful health organization took a position in 1965 clearly favorable to the tobacco interests ... In addition, the A.M.A was, until 1971, conspicuously absent from the membership of the National Interagency Council on Smoking and Health, a coalition of government agencies and virtually all the national health organizations, formed in 1964. The A.M.A's largely pro-tobacco behavior has been linked with the acceptance of large research subsidies from the tobacco industry – amounting, according to the industry, to some 18 million dollars.3

The risks of the "best" system of government are many. Capitalism permits profit-oriented corporations to make their millions out of large-scale robbery of the masses of health. As John McKinlay writes:

The most widely used food additive (although it is seldom described as an additive) is "refined" sugar. Food manufacturers saturate our diets with the substance from the day we are born until the day we die. Children are fed breakfast cereals which consist of 50 percent sugar. (See Hearings Before the Select Committee on Nutrition and Human Needs, Parts 3 and 4, "T.V. Advertising of Food to Children," March 5, 1973 and March 6, 1973) The average American adult consumes 126 pounds of sugar each year – and children, of course, eat much more. For the candy industry alone, this amounts to around $3 billion each year. The American sugar mania, which appears to have been deliberately engineered, is a major contributor to such "diseases of civilization" as diabetes, coronary heart disease, gall bladder illness, and cancer – all the insidious, degenerative conditions which most often afflict people in advanced capitalist societies, but which "underdeveloped," nonsugar eaters never get. One witness, at a recent meeting of a U.S. Senate Committee, said that if the food industry were proposing sugar today as a new food additive, its "metabolic behavior would undoubtedly lead to its being banned." (Dr. John Yudkin, Department of Nutrition, Queen Elizabeth College, London University. See p. 225, Senate Hearings, reference above).4

We should have known all this long before. We have had the record of the Edenic diet, (fruits, nuts, unrefined grains – a vegetarian diet) as the ideal. We also knew from the Passion account that our Lord Jesus Christ, the Son of God, refused a drug when it was offered him on the cross. Christians should have learned from the book of Revelation that it is Babylon that has a cup filled with drugs, not Jerusalem the symbolic city of God. But there is another reason for the present situation and it is this. The worst man knows more about duty, than the best man does. Our great problem is motivation. One poet put it in this way:

Grant us the will to fashion as we feel,
Grant us the strength to labor as we know,
Grant us the purpose, ribbed and edged with steel
To strike the blow.

New knowledge we ask not,
Knowledge thou hast lent
But, Lord, the will; there lies our bitter need.
Grant us to build above the deep intent
The deed, the deed.

- John Drinkwater
There is really only one motive that is supremely powerful for changing the life-style. True, in our day, love of life has led over 30 million in this country to give up tobacco. But there is a greater motive than the love of life to induce life change. That motive we will talk about in this manual – it is the motive that results from the good news of the gospel of grace, the good news of the forgiving love of God through Christ. Only such good news can lead a man to love his God more than his life, and in gratitude to reverence his body as the temple of God.

What would you take for your sight? hearing? powers of digestion? capacity to think and remember? power to walk? Would you take a million dollars for these or anyone of these? Health is worth more than a million dollars, it's worth more than a million million of dollars. We offer you that inestimable treasure in the pages that follow as you ask God to guide your thinking and inspire your doing.

SUMMARY

Only since the 1960s has the evidence been conclusive against high-fat, low-fiber diets, and against smoking. Only in the 1980s has come conclusive evidence of the dangers of physical inactivity and the value of regular exercise.

For decades, conscientious physicians have been plagued by the awareness that typical medical approaches do very little towards the cure of chronic disease.

The Bible suggests a lifestyle that is simple and yet productive of great vigor and vitality. This lifestyle includes the use of fresh whole foods chiefly of vegetable origin, abundant physical exercise, and trust in God.

Many people fail to reform their lifestyle because they lack motivation. But for those who know the gospel they confess, “For love of Christ constraineth us” (2 Cor 5:14).

Walking five miles a day can reduce a person's risk of death by 50 percent.

In most cases the length of life is proportionate to the distance covered by foot during the lifetime.

Large corporations make millions out of the ignorance of consumers. They willingly aid people to commit suicide by the use of knife and fork.

The best motivation for enabling people to change their habits is the motivation of the gospel.

REFERENCES

1. Cited in Cured to Death, p. 178
CHAPTER 5

Clues to Health from the Creation Story (Part One)

The opening chapters of the Bible refer to those simple elements which make life possible. It is our right relationship to these elements which determines (in most instances) not only how long we live, but how well.

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... then the Lord God formed man of dust from the ground, and breathed into his nostrils the breath of life; and man became a living being.

Genesis 2:7

* * * *

To insure health, a man's relation to nature must come very near to a personal one; he must be conscious of a friendliness in her ... I cannot conceive of any life which deserves the name, unless there is a certain tender relation to nature.

Henry David Thoreau, Journal

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Disease is the retribution of outraged nature.

Ballou

* * * *

The physician heals, nature makes well.

Aristotle

* * * *

Nature, time, and patience are the three great physicians.

H. G. Bohn

* * * *

To live by medicine is to live horribly.

Carl Linnaeus

* * * *

Creation and Health

The primary factors in human health are hinted at in the opening chapters of Scripture. Here the great themes are (beginning with the very first verse): God, heaven and earth, the Spirit, the Word of God, light, air, water, vegetation, sunshine, animals, man, marriage, obedience to divine requirements, tilling of the soil, and Sabbath rest. These are all clues to quality life, now and forever.

The first human was made out of the dust of the earth. When we die we return to the dust. Meanwhile, we must live on things from the earth. Approximately fifty natural elements must be regularly absorbed to preserve health. But these opening chapters of Scripture tell us that health is dependent on more than food alone.

Keeping in mind the above list, is it not evident that God is telling us we will function best as we give all items of Genesis 1 and 2 their appropriate place in our life-style? For example, the first words of Scripture say "In the beginning God." Only that life which is conscious of its dependence upon God, and which strives to live in right relationship to him, can hope for lasting health in time and eternity. There can be no superior quality of living unless God is acknowledged. God is more necessary to every creature than the solid earth itself. "Where there is no God, everything is permitted" said Dostoyevski, but if we grant his existence we must concede that he either matters tremendously, or he doesn't matter at all. To let God be God, to acknowledge him as the one great circumstance is the chief art of life.

The Scripture proceeds to talk of heaven, for if we are earth-bound in our purposes and vision, we shall ultimately lose the best that life offers. Without heaven earth is only a hemisphere. Because we are by nature (as a result of the Fall) "without form and void" – that is a chaos, and a chaos wrapped in darkness – we need the light of God's word and the moving of God's Spirit to make us whole. This will bring the resurrection experience intimated when the earth rose out of the waters on the third day of Creation. After that we will begin to make distinctions between right and wrong, good and evil, life and death, as hinted at by the division between light and darkness, and earth and heaven, in the succeeding verses of Genesis 1.

Thus, these initial verses portray not only the story of creation but also the recreation or redemption of fallen humanity (see Jn 1:1; 2 Cor 5:17; 1 Pe 2:9). By the power of the Spirit and the Word of God, man's chaotic sinful nature can become a cosmos, even a temple of the living God, reflecting the image of the Creator – just as Adam the first man did. Genesis 1 tells us not only how to live but how to live forever.

"And God Said, 'Let There Be a Firmament ...'" – Genesis 1:6

Early in the account we read of the firmament or atmosphere. Without food man can live weeks, without water days, but without air only minutes. Those who would reach maximum health must rightly relate themselves to this element. When we
compare the idyllic outdoor life of Eden and its unpolluted environment with our own indoor existence in polluted cities, the contrast is painful. One thing is certain – all the air of the open heavens won't benefit us unless we breathe it in, and those who breathe most deeply, regularly, in a "clean" atmosphere, are the ones taking the best advantage of God's free gift.

The Framingham Study showed that both quality and quantity of life are largely dependent upon an individual's vital capacity, that is, the volume of air that can be voided from the lungs after intake. Those with a low vital capacity are many more times likely to experience an early death than those with a maximum capacity. Furthermore, of all bodily organs it is the brain which is most dependent upon oxygen. Both clarity and cheerfulness of thought are almost impossible for those who exercise little. Are you feeling depressed or anxious? Get outside under the open heavens, and breathe deeply while walking briskly. It is a much better cure than chemical tranquilizers.

For the first time in history there is general air pollution making city living second-class. Whole forests and communities are being severely affected. There are over 200 atmospheric stations throughout the world which take samples of the air, testing it for its quantities of sulphur dioxide, carbon monoxide, nitrogen oxide, and other gases produced by industry and automobiles. In certain cities, rates for respiratory diseases like emphysema are a 1,000 percent higher than in less-polluted regions of the earth. Inhabitants of such places are told daily about smog levels and warned regarding their physical activities. Warnings have come from government agencies that tetraethyl lead from auto exhausts may be a greater cause for concern than fallout from nuclear bomb testing. Thus, the special steps taken in recent years.

Pollution is even threatening the earth's protective ozone layer. This layer, high in the atmosphere, protects earth's inhabitants from dangerous radiation from the sun. Pollution is eroding this protective shield.

In 1952 thousands of people died in a matter of days in London. The atmosphere was so filled with the fumes of millions of coal fires that aged Londoners often found it difficult to breathe, and some of them ceased doing so. Since that time London has cleansed her skies and no such disaster has been repeated, but how sad that it takes tragedies to wake us up! Today we are learning about another threat, one which takes thousands of lives every year unnecessarily – the threat of radon gas.

It is estimated that in the USA, the most dangerous source of radiation is the invisible, tasteless, and odorless gas, radon. It is responsible for 20,000 lung-cancer deaths yearly. The Environmental Protection Agency has stated that radon may be menacing 8 million homes in the USA. It comes from underground uranium, percolates up through the earth, and seeps into houses. Millions of energy-conscious home-owners have sealed their dwellings so effectually that they have not only kept the cold out, but they have sealed radon in.

Inasmuch as perfect health is dependent upon the thorough oxygenation of the body tissues, a good circulation of air is a primary rule of hygiene. What we are learning now, and more completely each year, is that civilization's methods damage the quality of air. Air, like blood, needs to be in constant movement. Stagnation of air invites disease. Air also requires continual cleansing.

For years we have been treating the atmosphere as if it were a sewer. We have poured different kinds of waste products into it – smoke, dust, gases, and fumes. According to the World Health Organization, in some countries deaths from bronchitis have increased in urban areas by 38 percent. A spokesman for WHO declared: "Since man has improved his means of transportation, concentrated his industries, and considerably developed the sources of energy available to him, atmospheric pollution has become one of the major worries of health authorities."

Gaseous pollutants are the product of industrial and domestic combustion. Sulfur oxides are widely prevalent, and even in very low concentrations cause irritation of the nose and throat. There have been several air pollution disasters apart from that of London, and sulfur dioxide is a prominent cause of these. There are also nitrogen oxides, ozone, carbon monoxide and other gases such as alcohols and esters, halogens, and aldehydes. These are toxic, and strong eye irritants as well.

Apart from the gaseous pollutants, there are the finely divided solid or liquid droplets which we call aerosols. These include silica, iron, coal and uranium dusts, fumes, mist and smoke. Some of them are radioactive. Aerosols are so fine they can penetrate the lungs with ease. They also act as carriers of microbes and viruses.

As is well known, smog is a devised word which links "smoke" and "fog." Smog is common to many metropolitan areas, particularly along seacoasts. Wherever there is an atmospheric temperature inversion, the noxious gases are trapped at a low level. In some cases they are made even more noxious by the action of sunlight, becoming a photo-chemical smog, as in Los Angeles.

Not only the eye and the throat, but lungs and heart can be seriously harmed by air pollution. Chronic bronchitis, asthma, emphysema, lung cancer, and heart diseases are all provoked. At both extremes of the life span, infants and the elderly, this threat is particularly harmful.

For most of us, the two pollutants of which we need to be chiefly aware are carbon monoxide (from the burning of gasoline in automobiles), and tobacco smoke, with its many dangerous elements. Those who get caught in traffic jams often suffer from carbon monoxide poisoning – the symptoms of which include headache, abdominal pains, nausea, and in extreme cases, temporary blackouts and loss of vision. Even worse, however, is the danger of tobacco smoke for a heavy smoker. Someone middle-aged who smokes more than twenty cigarettes a day has twice the risk of death as someone of the same age who does not smoke.

The air we breathe is even more important than the food we eat. Our lungs contain about 600 million tiny air sacs. What we feed them is vital to health, especially the health of the brain. The brain is several times more dependent on oxygen than any other part of the body. The wise person will do everything possible to avoid being exposed to urban pollution for long periods of time, and to auto and tobacco pollution for even short periods. An automobile that is idling may emit as many as 100 billion microparticles per second. These are not filtered out by our respiratory hairs or mucus, and can become lodged in our lung tissue or pass into the bloodstream. We need to spend most of our time where the air is safe to breathe.
Fresh air is of little avail unless we breathe it deeply. Most adults take in about one pint of air with each breath. That’s only about one-eighth of what the lungs can hold. Our capacity for air intake is called our vital capacity, and upon it longevity and health largely depend. Vital capacity ranges from about 2 to 5 liters. Unless a person exercises vigorously, his vital capacity will decrease, and disease is invited. One who exercises aerobically is taking in several times as much oxygen per minute as a sedentary person, and the vital changes needed for metabolism are speeded up. In some mysterious way oxygen has the power to vitalize every organ of the body. It is as though it electrifies the whole system. Oxygen imparts serenity to the mind, excites the appetite, and renders digestion more perfect. It also induces sound sleep. Without abundant oxygen the blood moves sluggishly, and body wastes that should be thrown off are retained.

Many people who are rightly fastidious about the bathing of the outside of their bodies forget that the bathing of the inside by copious drafts of fresh air is more essential. Without the abundant oxygen that is absorbed as a result of vigorous exercise, it is impossible to think clearly, purely, or optimistically for long. Here is something that is free, available, and yet despised by most. Less than 2 percent of people over thirty-five years of age exercise enough to oxygenate their body tissues adequately to prevent disease.

We have already hinted at the fact that your home can be a source of danger. Unless there is adequate ventilation, you are inviting trouble. As Jane Brody has written in her Guide to Personal Health:

    The air you breathe in your home or office may be more harmful to your health than the outward air in the most polluted of cities. Many people don't realize that their 'perpetual cold' or other nagging symptoms may be caused by the air in their own homes, at school, or on the job. Some have been plagued for years and have visited doctor after doctor in a vain attempt to uncover the cause of their problem. Once the real culprit is suspected or identified, many sources of indoor pollution can be greatly reduced and perhaps prevented entirely.²

The same writer sums up the range of pollutants indoors thus:

    Virtually every household and office building is a potential source of excessive amounts of one or another toxic pollutant-nitrogen dioxide, carbon monoxide, hydrocarbons, formaldehyde, radon (a radioactive product of radium), sulfur dioxide, asbestos, not to mention the chemicals in hair sprays, deodorants, oven cleaners, paints, pesticides, laundry aids, floor and furniture polishes, glue, and, ironically, air fresheners. Your kitchen range, fireplace, heater, rugs, walls, furniture, clothing, even the sheets you sleep on can be significant sources of indoor air pollutants.³

Of these items, asbestos, is one of the most dangerous and the most ubiquitous. There are over 3,000 uses for asbestos. It is largely used as insulation for buildings and in ships, and is found in the brake linings and clutch plates of automobiles. It has been incorporated into cement, and filters made from it are used in the manufacturing of some imported wines. Even hair dryers for years were insulated with asbestos, and it was widely incorporated into the spackling and tapering compounds used for drywall construction. Between 1946 and 1973 it was added to coatings that could be sprayed on to walls in place of plaster. Probably some 30 million tons have been used in the United States since the beginning of this century and by its end, according to one estimate, "Some half a million people will have died as a result of their exposure to asbestos."⁴ When substances incorporating asbestos produce dust they are very dangerous indeed, but when left undisturbed there seems little risk. Lung cancer is a common problem among those who have worked with asbestos. For people who also smoke the odds for contracting cancer are compounded. Asbestos thus represents a major public health problem, and every possible method should be followed to remove it from our environment.

The practical points to remember regarding air pollution are: 1) Your home can be hazardous to your health. 2) Be sure your house is well ventilated. 3) Beware of the popular pollutants found in most homes. 4) Avoid prolonged exposure to automobile exhausts and industrial fumes. 5) Live much in the open air. Walking, gardening, even doing some home chores outdoors ultimately pays great dividends unless your geographical site is one with poor air quality. (To live and work in our most polluted cities is the equivalent of smoking several packs of cigarettes each day.)

Ofices as well as homes are often polluted places. There are, in this country and others, multitudes of "sick buildings" which produce sick people. Air-conditioning ducts often contain much garbage laced with bacteria and fungus. In some cases, the bacteria count even in hospitals is worse than in a chicken coop. Unless air-conditioning systems are periodically cleaned, they become microbiological soups, resulting in eye irritations, dry throats, runny noses, headaches, coughing, skin irritations and excessive fatigue.

A final word about air. Air is as much a food for the body as bread, fruits, and vegetables. As such, it is capable of being damaged and rendered a health danger rather than a health aid. Cooked air is probably as detrimental as food that is excessively cooked. Heated air that is not being replaced by fresh air does not vitalize the human system. The moral is that we should live much in the out-of-doors. Happy is that person who, weather permitting, can even sleep on a deck in a rural home setting.

"Let the Earth Bring Forth the Living Creature ..." Genesis 1:24

What about the animals? One of the most interesting details discovered by modern preventive medicine is that people who have pets have better health than those who don't. Longfellow wrote that God invented animals that life's feast might be more joyous. Those who have no pets are losing a part of life as God intended it to be, and with it a part of health too. Very active caring for an animal does something vitalizing for human beings, and the love response of a pet is also life enhancing.

"Male and Female Created He Them" Genesis 1:27

Those who are single may be called by God to a special task, but the first man was given a helpmate. Those who are single generally die earlier and more readily than those who are happily married. Loneliness is a great menace to health. Scripture tells us from the beginning "that it is not good that man should be alone." On the other hand, an unhappy marriage can be worse than death.

"I Have Given You Every Herb and Fruit" Genesis 1:29
In this chapter we only introduce the subject of nutrition. Later chapters will elaborate further. What we put between our lips is the chief cause of life and death. Our lives cannot be superior to the quality of our food. When man invented machines to refine his food, he paved the way for all the major chronic diseases. “What therefore God hath joined together, let not man put asunder” (Mt 19:6) is a principle that applies to more than marriage. When we separate the outer husks and germ from grains, we shed life-giving minerals, vitamins, and vital fiber.

For good health, one must mainly subsist on fresh whole food, chiefly of vegetable origin. If you choose products made of refined flour you open the Pandora's box of disease. White flour has had twenty-four essential elements removed, and six synthetic ones added.

The vegetable referred to on the third day is for our health also. The original diet for man was fruits, nuts, and grains — all vegetable matter. Scripture admonishes us: "Whether you eat or drink, or whatever you do, do all to the glory of God" (1 Cor 10:31 RSV). "Thou shalt not eat any abominable thing" (Dt 14:3).

The individual is responsible to a large degree for his own habits in this regard. The best of medical specialists today are urging upon us the idea that the chief factor in national health is individual responsibility for a correct life-style. That particularly applies to diet. According to The Journal of the American Medical Association, August 8, 1980:

The area of nutrition has been neglected by the medical profession. Most medical schools devote less than three hours of total instruction to nutritional deficiency and therapy. Only 3 of all questions on parts I, II and III of the National Boards deal with the nutritional aspects of disease. In short, physicians in the United States are not required to have any understanding of nutrition to be licensed to practice medicine.

While this remains true for nine-tenths of practicing physicians, it is good to know that doctors in training in 1987 are receiving more instruction in this area than previously.

Nevertheless, it is wise to remember the average Harvard doctor knows as much about nutrition as his secretary unless the secretary has a weight problem in which case the secretary knows more! Therefore, heed the admonition of leaders in the medical profession and take personal responsibility for your diet. It need not be a complicated affair. It simply means making the major portion of your intake unrefined foods, unprocessed, unpackaged and uncanned. "Eat ye that which is good, and let your soul delight itself" (Is 55:2).

By now you will be aware that, "Much of what is being sold as food on your supermarket's shelves is not really food at all. It's garbage. It's garbage handsomely packaged and labeled as food, but it is garbage all the same."

One could, with good reason, place many new labels on supermarket counters. Alongside the cakes and cookies, we could put the label – diabetes and tooth decay; alongside the dairy products – heart disease and high cholesterol; alongside the meat section – disease and bowel cancer; by the wines and liquors could go the label – cirrhosis of the liver; by the tobacco packages – lung cancer; alongside foods that have been highly colored – allergy and hyperactivity; by coffee and tea – anxiety; above the salt – high blood pressure and stroke.

That refined flour lacks essential elements of nutrition all have heard, but it is just as important to say a word about refined oils. The popular oils bought in bottles: peanut oil, safflower oil, corn oil, are highly refined and processed. They too play their part in producing disease. Several recent studies have suggested that excessive consumption of these may contribute to cancer.

God intended we should get their fats in the form in which he made them. Pure fats are never found in nature, they are always emulsified. Our body finds it very difficult to handle pure fats, but when taken in nuts, avocados, etc., there is no problem. The average amount of fat consumed in this country is 42 percent of the total caloric intake. In Third World countries, it is much closer to 10 to 20 percent. One reason for this tremendous difference, of course, is that most of the inhabitants of Third World countries are nearly vegetarians or solely so. People who use much meat cannot but have many of their calories in fat.

Twenty-five years ago, the American Heart Association recommended an increase in the use of polyunsaturated fats, but in 1982 the National Academy of Sciences Report, Diet, Nutrition & Cancer, concluded that a relationship between fat and cancer was most persuasive, especially for polyunsaturated fats. Dr. T. C. Campbell, one of the authors, declared, "The relationship between diet and cancer, in my opinion, is now more persuasively established than the one between diet and heart disease." He had in mind, particularly, the dangers of high-fat intake.

To use vegetable oils lavishly is to create an imbalance that is never found in nature. Refined oils are more chemicals than they are foods.

Anyone who is serious about nutrition needs to consider the advantage of a diet that is either wholly or largely vegetarian. The latter is now recommended by all scientific researchers in nutrition as a result of recent studies which have demonstrated the dangers of high cholesterol and saturated fats. This is a diet where most food elements are obtained firsthand rather than secondhand through the flesh of animals. Only plants have the ability to manufacture food from soil constituents. Animals can't do that. Are you afraid that a vegetarian fare would not give you enough strength? Well, consider the staying power of the ox.

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What is quite beyond dispute is the fact that the source of dangerous cholesterol is the animal kingdom. More than a million Americans suffer heart attacks each year with over half of them dying as a result; their cholesterol is considered the heart of the matter so far as coronary heart disease and strokes are concerned. Vegetarians have no risks in this regard, whatsoever, as there is no cholesterol in a pure vegetarian diet, though lacto-ovo vegetarians derive cholesterol from eggs, milk, and cheese.

The usual fear about vegetarianism is that it might not furnish enough protein. Today, however, that myth is no longer believed by informed people. As the years have passed, scientists have been making lower and lower estimates of the daily need for protein. It is quite impossible for any vegetarian with a normal appetite and who partakes of a variety of food to get insufficient protein. But what about the so-called first-class proteins? In reply, we quote from the famous medical journal, *Lancet*:

... formerly vegetable proteins were classified as second-hand and regarded as inferior to first-class protein of animal origin; but this distinction has now been generally discarded. Certainly some vegetable proteins, if that is the sole source of protein, are relatively low-value promoting growth; but many field trials have shown that the proteins provided by suitable mixtures of vegetable origin enable children to grow no less well than children provided with milk and other animal proteins.6

Nutritionists today are pretty much agreed that vegetarians are at no risk as regards the adequacy of their diet with the possible, but unlikely exception of vitamin B-12, easily supplied by such foods as tempeh and which is only required in very minute amounts. Roger J. Williams, author of *Nutrition in a Nutshell*, says: “Vegetarians can be well-nourished if they eat wisely and include leaves, seeds, roots, and fruit in their diets” (p.41).

It is significant that human teeth are similar to those of herbivorous animals. It is well known, that the dental structures of vegetable-eating animals and meat-eating animals stand in sharp contrast. We quote William S. Collens and Gerald B. Dobkin:

The dental structures of herbivorous animals consist of sharp-cutting incisors, while the molars have a flat or nodular surface used for crushing and grinding food. This presupposes that such animals are phylogenetically structured who live on vegetables, leaves, roots, fruits, nuts, and berries. On the other hand, the carnivore has a dental structure designed to provide him with the means of eating raw flesh. The canines are elongated, strong, and sharp-pointed. They are used for grasping and tearing flesh. The molars have a lateral edge which is sharp, and in approximating, the jaws are used for slicing flesh.7

It is also true that the lengthy intestinal tract of human beings is similar to that of herbivores. Even the lipoproteins in human blood resemble those found in the blood of herbivores. Now we can see good reason for the biblical statement: “I give you all plants that bear seed everywhere on earth, and every tree bearing fruit which yields seed; they shall be yours for food” (Gn 1:29 NEB). We would not suggest that all must become vegetarians. The Bible makes no such demand. But the evidence is overwhelming that animal products should be used more as seasonings than as staples.

Meat is not only excessive in its protein and fat content, but it is deficient in calcium, potassium, carbohydrates, and, of course, fiber. Furthermore, as indicated earlier, meats contain concentrated pesticides. If a person eats the flesh of a grazing animal that has consumed a tremendous amount of grass or grain, he, thereby, absorbs the pesticides which have been accumulating within the animal. The further up the food chain one goes, the more chemical pesticides are concentrated in the fatty tissues.

While plant diseases do not infect man, some of the animal diseases do pass directly as we have mentioned earlier. A vegetarian joke, “It's so nice to sit down to a meal and not have to worry about what it died from,” may be much more than a joke. Trichinosis is one example of an animal disease easily acquired by man. Those who consume raw or inadequately cooked pork can be infected with tiny worms called trichinae. Soon there are hundreds of parasites traveling through the body which result in fever, headache, and prostration, sometimes lasting for months. While there is still controversy as to whether cancer can pass from animals to human beings, there are an increasing number of researchers who believe that it can. Certain modes of preparing meat, such as barbecuing, often turn fats into carcinogenic hydrocarbons.

Those interested in ecology should remember that the yield of vitamins and minerals is a hundred times as great from fields planted with vegetables than where food is derived from animals which have been nourished by those fields. Vitamin C and pro-vitamin A occur in significant amounts only in plant foods. B vitamins occur in seeds, and in leaves and yeast. Certainly for the person who is budget-conscious, vegetable foods are the most economical source for most nutrients.

The problem that haunts about a third of Americans, obesity, ceases to be a problem for almost all who become vegetarians, or mainly so. That fact on its own should be enough to influence large numbers to make the trial.

While the use of fish is beneficial as regards resistance to coronary heart disease, there are risks involved in using a large amount. Mercury poisoning is one, and another is ciguatera. Ciguatera poisoning can be acquired from about three hundred species of fish, usually those who dwell in the narrow range of reefal, coastal, tropical waters. Thousands of people around the world suffer from this disease every year. No immunity is gained by a single attack. Indeed the second episode can be much more severe. As The Textbook of Medicine by Beesom and McDermott points out:

A number of different mechanisms are involved in fish poisoning. Some species are inherently poisonous; the toxin of other species are acquired from organisms on which they feed; yet another form of fish poisoning is caused by breakdown products of bacterial action.18

At least 90 percent of the fish eaten in this country have been frozen for considerable time, but that is a minor problem compared with the fact that fish are often contaminated by sewage or other filth. Such fish who so feed may pass into distant waters and be caught where the water is pure and fresh, yet they are dangerous for use as food. Do not make the mistake of equating all fish caught in our modern waters with those miraculously multiplied by our Lord centuries before the pollution of
rivers and seas. Flesh foods may occupy a place in your diet, but they should not constitute a major source of nutrients. Use animal products not as staples but as condiments – in other words, to stay alive, use live foods, not dead ones!

**SUMMARY**

The opening chapters of the Scriptures mention all the elements of good health. God, heaven, the Spirit, the Word, the atmosphere, vegetation, the sunshine, the animals, the helpmate, work and rest, are all itemized in the Bible story of the beginning. Health consists in a right relationship to all of these.

**REFERENCES**

3. Ibid., pp. 368-369.
5. Jan W. Leonard, J. L. Hofer, N. Pritikin, *Live Longer Now*, p. 117. The quotation may sound extreme but it is not. There is an abysmal ignorance about nutrition among food manufacturers, and because doctors share that ignorance, the poor unsuspecting public continues to suicide by knife and fork. But a new day is dawning. Note the following from one of the greatest and most respected medical journals:

   Since the days when vitamins were discovered and dramatic improvements could be expected in some deficiency states after the administration of a few tablets, nutrition has been a neglected area of medical practice and therefore of medical education. Respected clinicians have been heard to inquire whether any nutritional problems existed in the Western World apart from over-nutrition. But the possible impact of nutrition, both prophylactically and therapeutically, is again becoming prominent. The formation a few years ago of a European nutrition group, which meets annually (when the majority of communications are presented by clinicians), the fact that the Nutrition Society devotes one symposium a year to clinical nutrition, the emergence of several new international journals on clinical nutrition, and a series of articles in *The Lancet* this year are signs that clinicians increasingly believe that the science of nutrition can help in the care of patients. (*The Lancet*, June 25, 1983)
CHAPTER 5
Clues to Health from the Creation Story (Part Two)

Health can be likened to the Tree of Life in the Garden of Eden. All the other good things of existence are the fruit of this tree. But the fruit is only for the obedient.

The Camel's hump is an ugly lump
Which well you may see at the Zoo;
But uglier yet is the hump we get
From having too little to do.

Rudyard Kipling, Just So Stories

Those who say they simply haven't time for good health practices should at least consider this question; "What do you usually do with the time you save?"

Exercise, especially in the company of family or friends, will provide more pleasant memories than television ever will.

Benjamin A. Kogan, M.D., Health, p. 721

Everything that lives has a rhythm that is synchronized with individual rhythms of all that relates to it.

Benjamin A. Kogan, M.D., Health, p. 8

By ceaseless action, all that is subsists;
Constant rotation of the unwearied wheel
That Nature rides upon, maintains her health,
Her beauty, her fertility. She dreads an instant's pause,
And lives but while she moves.

William Cowper, The Task

Walk in the Light!

"And God Made Two Great Lights ..." Genesis 1:16. If you were an astral giant, you could toss earths into the sun for days, one per second, without filling that great pit of fire. It is a symbol of God as the One of superlative importance without whom all life is impossible. When we remember that the sun's mass is 99.8 percent of the mass of the entire solar system, we have a hint of the supreme importance of the Creator for every creature. The moon has no light of its own, and its radiance is the result of its reflection of the sun. Is not nature thereby telling us of the only way to true glory?

Every gardener has noticed the difference between plants growing in the sunshine and those that are always in shadow. We know what happens to green grass if timber is placed over it. Soon it turns yellow. Human beings also need the sunshine, and they need it regularly. Abuse never cancels use; and the fact that many have worshiped the sun by long exposure of their naked bodies to it, thus risking skin cancer, should not prevent the rest of us from securing the blessings that come from the legitimate use of sunshine.

The human organism requires sunshine as certainly as vegetation does for life and growth and health. We were intended to spend much time in the open air. Because the human body is marvelously adaptable and also wonderfully long-suffering, people seem to survive years of incarceration in homes and offices with only proportionately short periods in the open air. But there is a cost nonetheless for shutting oneself away from the natural elements. The healthiest of all people are those who are frequently in the great outdoors. The human body, when adequately protected, benefits from being exposed to wind and weather and sunshine.

There is a great danger that all the needed warnings about skin cancer may lead millions to remain largely indoors. That ultimately would have a devastating effect upon health. We believe that continuing research will provide more and more evidence that the temperate use of sunshine brings blessings available in no other way. The fact that nature intended that we should draw our vitamin D from the sunshine in order to ensure the right deposition of calcium and the direct functioning of other metabolic processes is conclusive evidence that man is meant to spend time in God's great out-of-doors. Not only the human body, but as many rooms of our homes as possible should be exposed to sunlight, for it is one of nature's most potent antiseptic or germicidal agents. Sunlight destroys bacteria, molds, fungi; many of those things responsible for allergies.

Those who turn night into day by the use of artificial lighting are choosing a second best. The hormonal system is greatly influenced by light and influenced best by natural light. Dr. John N. Ott has shown that fluorescent lights can be a cause of hyperkinesis or hyperactivity in children. Too many people are suffering from an unnatural light environment. Color TV, windowless buildings, sunglasses, neon lighting and fluorescent lighting, all have a detrimental impact. Together they constitute the main light environment for many people.
There is a definite relationship between light and the emotions. The highest statistical rate for suicide in Alaska is but part of the evidence. There seem to be metabolic involvements as well. Rats kept in darkness are more likely to prefer alcohol than water.

"And ... God Divided the Waters” Genesis 1:7

Covering 70 percent of the earth's surface, water is the most common substance on earth. It is the one drink that God devised for man, and it possesses solvent, lubricating and heat-absorbing properties. As an essential of life we can live but a few days without it. For a human being to lose more than 20 percent of his body water is fatal.

The blood is approximately 80 percent water, carrying the vitamins, minerals, enzymes, hormones, red and white cells, blood gases, and waste products of the body. Every process of the body involves water which can only be brought to the cells by the bloodstream – the approximately 60,000 miles of the circulatory system. This function is best guaranteed by adequate exercise. Because most of our blood system is capillary in nature, only vigorous activity can guarantee adequate circulation of the blood, and therefore, adequate distribution of elements including water.

If you had to drink all the water your body uses for its many functions, you would have to take daily 40,000 glasses. The body is equipped with a recycling system which saves us from that chore. While the kidneys filter about 400 gallons every day, only 5½ glasses of water are voided as urine. The average person loses daily about 10 glasses of water provided the weather is temperate. This must be made up for by the fruit and vegetables in our diet and the actual water we drink. It is not true to say as is often said that we must drink 8 glasses a day. That is only the case if one has little by way of fruits and vegetables. The best procedure is to drink at least 2 glasses of water on rising and then drink again between meals, and at meals eat freely of juicy foods.

WATER CONTENT OF VARIOUS FOODS (PERCENT)

- Apples 85%
- Apricots 85%
- Avocados 74%
- Bananas 76%
- Beans (cooked) 70-90%
- Beetroot 91%
- Cabbage 93%
- Bread 35%
- Carrots 90%
- Zwiebach 5%
- Cucumbers 95%
- Grapes 82%
- Eggs 73%
- Lemons 90%
- Peas 83%
- Milk 87%
- Pineapple 85%
- Potato 80%
- Pumpkin 91%
- Bacon 8%
- Biscuits 27%
- Cakes 18%
- Chocolate 1%
- Honey 17%
- Yeast (Torula) 6%

If you fail to drink enough water for your needs, kidney stones may be formed. People who use analgesics should also drink water regularly and in considerable amounts to avoid diseased kidneys. High concentrations of aspirin, phenacetin, and codeine eat away the center of the kidney otherwise. This has been the problem of a large percentage of the 10,000 people in the USA who are now awaiting kidney transplants.

Don't fall into the trap of habitually drinking iced drinks. That habit predisposes a person to strep throats and frequent colds through reduced mucous protection. Drinks containing caffeine or alcohol lead to an increased loss of water through the kidneys and can produce dehydration.
Despite the popularity of coffee in this country and tea in Britain and Australia, there is little that can be said in favor of the large use of either. It is the caffeine stimulant within tea and coffee that makes both so popular. But all should remember that the use of drugs is like borrowing money. We pay back all we get, plus considerable interest. People with known heart and circulatory conditions, particularly, should avoid caffeine because of its strong action upon the heart and blood vessels.

Tannin which is found in both coffee and tea, has an irritating effect on the lining of the stomach. Tea contains oxalic acid, which is a poison from which the body must protect itself. One result is the reduction of the absorption of food calcium.

Caffeine, also, is an exciting cause of hyperinsulinism – excessive secretion of insulin by the pancreas. Escalated attacks of weakness, trembling, and sweating can result. Caffeine beverages also precipitate or aggravate ulceration. The most common suffering, of course, associated with the use of these beverages is headache.

Most canned fruit drinks are laced with sugar and are, therefore, harmful. Even those which contain nothing but the juice of fruit should not be taken in large amounts. Fruit was meant to be used chiefly in its whole condition so that we might get its fiber as well as its juice.

Many take milk as a drink and too often forget that milk is actually a food that should be reserved for the meal hour. A large percentage of people are allergic to milk and all should reason carefully from cause to effect. Man is the only animal who takes milk after being weaned.

If we use water for drinking purposes as freely as we should, it is a matter of some concern as to how pure our supply might be. In some cities of America, the water consumed has already been through human kidneys several times before. Furthermore, infectious diseases can be transmitted through tap water. This afflicts at least 10,000 Americans a year. Far more serious is the fact that the nation's 50,000 water supplies are "liberally laced with potentially harmful substances – including asbestos, pesticides, heavy metals like lead and cadmium, arsenic, nitrates, sodium, viruses, and organic chemicals that are known to cause cancer."

Even the very process we use for disinfecting our water – chlorination – is responsible for adding to our cancer toll. Chlorine combines with other pollutants in water to form well-known carcinogens. Nevertheless, in many areas chlorination is essential, and the chlorine itself can be dealt with by permitting water containers to stand some hours before consuming.

Not all bottled waters solve these problems. Some are no better than that which comes out of the faucet. Many bottling plants have sanitary deficiencies. It's worthwhile to consider a home water purifier, but remember they vary tremendously in effectiveness.

Boiling is an excellent safeguard when dealing with contaminating bacteria, and if the boiling is done gently, it can even evaporate many of the carcinogens including chlorine. The boiling should be for at least ten minutes but it does not remove minerals or chemicals. Rain water collected in urban and industrialized areas may be contaminated by hydrocarbons and toxic minerals such as lead, mercury, and cadmium. Distillation and reverse osmosis systems make the best purifiers, though neither is 100 percent satisfactory.

Don't make the mistake of avoiding drinking water because of the problems. Do the best you can. Purify your water supply and then drink freely rather than using carbonated soft drinks which are chemically-made beverages. Remember that, according to some research scientists, even a few glasses per day of drinks containing sweeteners can greatly multiply your risk of contracting bladder cancer.

"It Is Not Good That Man Should Dwell Alone" Genesis 2:18

C. K. Chesterton has warned us against taking the marvel of femininity for granted, thereby being led to transgress God's law of monogamy. In his own whimsical way he says:

"Keeping to one woman is a small price for so much as seeing one woman. To complain that I could only be married once was like complaining that I had only been born once. It was incommensurate with the terrible excitement of which one was talking. It showed, not an exaggerated sensibility to sex, but a curious insensitivity to it. A man is a fool who complains that he cannot enter Eden by five gates at once. Polygamy is a lack of the realization of sex; it is like a man plucking five pears in mere absence of mind." 2

"And the Lord … Put Him Into the Garden … to Keep It" Genesis 2:15

Man was given work to do – the tilling of the soil. This engaged him in body and brain. Today we know that job satisfaction is one of the major factors in longevity. Emerson said "Blessed is the man who has found his work, let him ask no other blessedness." Adam's body, like ours, had approximately 650 muscles and all of them were meant to be used. Dr. Paul Dudley White reminds us that the greatest risk that comes from automobiles is that they take us off our feet and he meant – not accidents, but inactivity.

After the Fall, man was told that in the sweat of his brow he was to eat bread. If we don't sweat we shouldn't eat (see 2 Th 3:10). The most sedentary people have a likelihood of an early death eight times that of the most physically active. The person who does not spend at least half an hour a day in vigorous physical activity is cheating himself and paving the way for pain and loss. Nothing complicated is required. Walking is the best general all-round exercise and it's available to practically all.

Thus, even man in Paradise was a worker, not a shirk. He could only appreciate the Sabbath to the full because his other days in contrast were busy and active, even physically so. Very rarely in Scripture do we read of persons either fat or sedentary. Such are, for the most part, deviations which have overtaken the human race since the industrial revolution. Obesity was never intended as a human norm and frequently augurs tragedy.

The Bible is no friend of physical idleness, but in today's culture, exercise of the muscles is attained only by deliberate resolution and self-discipline. Until the turn of the century, the greater proportion of human beings earned their livelihood by physical toil. That is now rare. Machines do our work while we degenerate from sedentary living.
Not only do machines do most of our work, but they transport us from place to place instead of our own muscle power. This is fortunate for those who have long journeys to make, but it can also be dangerous, encouraging a lazy life-style. A famous English historian once said that the best two physicians in the world are Dr. Right Leg and Dr. Left Leg. In these days when one out of every two persons dies of cardiovascular disease, the knowledge that our leg muscles function as an auxiliary heart should make us more keenly aware of the necessity of regular physical activity.

When one considers the regular routine of Bible characters, we find much cause for shame. For example, in John 4, we read about our Lord Jesus doing a morning's walk from Judea to Shechem of Samaria – a distance of between twenty and thirty miles. Not bad for a morning's walk. No wonder the Scripture says that Jesus, "being wearied with his journey, sat down at the well" (Jn 4:6). Notice in Acts 20:13, that Paul chose to walk from Troas to Assos rather than go by ship. That was a distance of thirty-five miles. Then if one reads the record of 1 Kings 18:45, 46 we read of an ancient marathon run by Elijah from Mount Carmel to Jezreel, a distance of approximately ten to twenty miles. Yes, the ancients were not sloths, but too many of us are today, to our detriment. We need to apply the mandate of God that if we do not sweat, we have no right to eat.

Physical fitness is composed of four chief elements: cardiovascular endurance (the ability to persevere in large muscle and whole body activities); muscular strength (such as lifting heavy weights, pushing a stalled car, etc.); muscular endurance (being able to repeat the specific muscle action again and again, such as push-ups or sit-ups); flexibility (the ability of a joint or a sequence of joints to operate within a wide range of movement).

In case all of that sounds depressing, let me point out the benefits of exercise. Those who exercise have fewer irregularities in heart rhythm. They have a lowered blood pressure. All other things being equal, they are less prone to the killer diseases of our time. Exercise enhances the ability of the blood to dissolve clots which could threaten life by obstructions in the heart, lungs, and brain. Exercise renders a person less likely to develop diabetes and makes diabetics better able to survive. It helps in the battle with obesity. It is not that exercise in itself uses up a vast number of calories, but it is the fact that the body continues to burn extra calories for hours afterwards. If you are vigorous in your daily pursuits, you can eat much more food regularly without ill effect than the sedentary person.

Exercise prevents the loss of calcium from the bones. It reduces the risk of osteoporosis and the risk of bone fracture. And among many other benefits of exercise must be listed the dissolving of tension. Exercise is nature's tranquilizer, and would be far more effective for the 100 million people of the world who daily swallow Valium, etc. Jogging is more effective against depression than psychotherapy. Exercise creates its own "high" and develops within the person an ability of self-discipline which will yield many other dividends.

On the other hand, if you refuse to exercise, you should remember that being still is the next thing to being dead. If God in his providence has placed you in circumstances where exercise is difficult, you are only responsible to do the best you can and he will bless that, but be sure it is the best you can.

Now come to the hardest part. It is selecting a time and place to exercise today. The Danish philosopher, Kierkegaard, heard two gamblers talk. Afterwards he related that one of them said, "I don't know about tomorrow, but I won't gamble today." Kierkegaard said, "He'll beat the habit." The other gambler said, "One day I'm going to stop gambling." Kierkegaard said, "He'll never give it up." So the lesson is clear. Today is the day. Forming the habit is the key in this as in other routines. Decide upon a regular time and a regular place and the form of exercise you will undertake. Do that and the battle is half won.

There are three basic forms of exercise and one is much more important than the others. Isometric exercises put one muscle strain against another muscle or against an immovable object as when clenching the fists. A second type, calisthenic, involves stretching. It relaxes the body and prepares it for activity of a more rigorous nature. But the type of exercise that all should seek as a daily pursuit is aerobic exercise which involves the intake of large amounts of air continuously while major muscle groups are involved in walking, jogging, swimming, cycling, or the like. This is the ideal type of exercise as regards health and longevity. In aerobic exercise, the lungs may take in thirty times more air than usual and the heart can pump five times as much blood through its own arteries and the lungs, and up to twenty times as much through the working muscles as during rest.

Most experts today are agreed that twenty to thirty minutes of aerobic exercise at least three or four times a week is necessary for good health. But physiologists warn that no one should suddenly and abruptly begin such activity, particularly if one is past one's thirties. It is usually wise to be checked over by a physician before engaging in activity far beyond what one has been used to. If one's heart is normal, there is no danger in vigorous exercise. But a large number of people, particularly from middle life on, do not have a normal heart.

For most beginners, a good daily walk progressively increasing in speed and distance is the safest and most beneficial form of exercise. Probably the majority of beginners after forty-five will not get beyond this, though many have. Such activity requires no preliminary medical test.

If you become a jogger or engage in some similar high-level activity you need to remember what has been said about the target zone for heart activity. Your maximum heart rate is 220 minus your age. But the target zone for training is between 70 and 85 percent of your maximum heart rate. Less than 70 percent does not yield significant training value. Beyond 85 percent, if prolonged, can be dangerous.

It is preferable to choose exercises you enjoy doing. Some people find exercise easier if they do it in company. Others like to have a Walkman cassette player, using tapes filled either with ideas gathered from reading or music. If you can't stand jogging, you may enjoy cycling, or swimming, etc.

If you plan to engage in one of these higher-level activities, it is absolutely essential to remember the accompaniments of warming up and cooling down. By warming up we mean slower commencing activities. Muscles that are cold are like old leaves which can be cracked easily. Muscles which have become warmed by gradually increased activity are more like green leaves that can be bent with safety. Do not skip this warming-up time. It is a grave error to arise from a seat or bed and immediately begin intense activity. Many athletes give as much as ten minutes to this part of their exercise program. Some
walk as they warm up, while others engage in various stretching activities. If the latter, again caution is needed, that such stretching not be too intense. At the end of the twenty or thirty minutes or more of exercise, there should be a tapering off of activity. At least a five-minute cool-down of gradually decreasing effort such as walking instead of running is needed. If one fails to follow these principles, stiffness of joints will result.

If you wonder whether exercise is really for you at your age, remember that some have become marathon runners long after middle age! This is not recommended but it shows the possibilities.

For very busy people, time for exercise can be a mental haven. If the rest of the day you are very much exposed to interruption, this can prove a quiet retreat away from phones and knockings on your office door. As a Christian, you will also find it a beneficial time to pray and meditate and plan.

The program will prove itself. As you take in up to thirty times as much oxygen as a sedentary person, you'll find your thinking is enlivened and your feelings more stable and joyous and your tensions dissipated. The proof of this pudding is certainly in the eating. That's why it is often said that joggers become "hooked" or addicted. It is a splendid addiction. Nevertheless, even here temperance is necessary. Dr. Kenneth Cooper has said that anyone who runs more than five miles a day has some other reason than health.

While for purposes of health the amount of vigorous activity required each day is about twenty to forty minutes, all of us would do well to remember that it would be foolish to be entirely sedentary the other twenty-three hours plus. Dr. Paul Dudley White said we should never, during our waking hours, sit for longer than an hour. Some physiologists have long held that the body needs an expenditure of about nine miles of walking a day in order to be healthy. If you take a quarter of an hour walk after each meal, particularly in company with your spouse when possible, as well as your three to five miles of jogging or a cycling or swimming equipment, you'll reach the ideal. If your weight is approximately 150 to 160 pounds at commencement, you'll now find that you require a caloric intake of approximately 3000 calories. Sleep should be better, and your patience multiplied. You will feel regularly what Browning meant when he said that, "God's in his heaven, and all's right with the world."

SUMMARY

Abuse does not cancel use, and the fact that some worship the sun and invite skin cancer is no reason for not appropriating its rays every day, particularly while active.

Even in Paradise, man was given physical work to do.

After the Fall man was told, "In the sweat of thy brow shall you eat bread." If a man doesn't sweat he has no right to eat.

Inasmuch as the body is chiefly constituted of water, the quality and quantity of our liquid intake is vital.

REFERENCES

1. See *Sunlight Could Save Your Life*, by Zane R. Kime, for the most thorough available study on this subject.
CHAPTER 5
Clues to Health from the Creation Story (Part Three)

Jesus said, "The Sabbath was made for man." Even in Eden man needed rest, change, and worship. The Sabbath commandment, like the other nine of the Decalogue, existed from the beginning for all men, for all time, and was intended not as a legalistic exercise but a fountain of blessing.

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And God blessed the seventh day and sanctified it

Genesis 2:3

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And Jesus said: "The Sabbath Was made for Man"

Mark 2:27

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As "Lord of the Sabbath" He is supreme but He puts forth no abrogating power when He states its purport to be the good of man. "The sabbath was made for man." Mark 2:27. This is a mighty word. It looks backward – onward. It seems to say, it always has been, for man always had need. It always shall be, for man will always need. Thus Jesus decks the Sabbath with undying freshness.

Henry Law, Christ Is All, p. 101

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Rest a While

Jesus said, "The Sabbath Was Made for Man." Every strong and worthwhile life is characterized by rootage and fruiteage, receptivity and activity. Only when work and rest are properly apportioned is the stage set for achievement. Luther declared that man is like a drunken peasant who falls out of the donkey's saddle on one side or the other, and the saying applies not only to our spiritual tendencies, but our physical and mental. Whom the devil cannot make lazy, he pushes to destructive hyperactivity. A wise person learns to step back in order to jump further, to tarry a while that he might finish the sooner. Those who refuse to let go soon cannot hold on, and those who do not stop to find a footing cease to advance.

The human psyche thrives on a combination of stability and change. Too much of the first leads to boredom and too much of the second to tension. We find the ideal pattern in the seasonal cycles. There we have the stability of regular recurrence yet also the variety brought by periodic transition. The daily cycle of morning, afternoon, evening, and night is another illustration of both stability and change. Unless man, the creature of nature, conforms to the laws of nature, he will neither endure nor prosper. Both the lazy and workaholics invite premature decay and death.

A page without a margin would be intolerable to the sight, and a life without the margin of rest and recreation is similarly repugnant. Greed and inordinate ambition often lead men to ignore nature's demands for change and rest, but no one ever gains by trying thus to cheat the Creator's laws. Many millions through the ages have gone to the grave before old age and spent in the tomb those stolen Sabbaths which, if observed, would have preserved life and increased achievement. When Israel refused to obey the Sabbath law of the land, she was taken into captivity until the land had caught up on her Sabbaths (see 2 Ch 36:20-21). According to Revelation 20, this old earth will know a thousand years of Sabbath rest after Christ comes to take his people to heaven.

Karl Barth cites one fellow theologian approvingly who declared: "Where the holy day becomes the day of man, society and humanity withers away and the demons rule." Calvin said, "If it (the rest day) were abolished, the church would be in imminent danger of immediate convulsion and ruin." When God blessed the seventh day of creation week he added his authority to the natural law of rhythm and rest. At Sinai that law was codified and became part of the moral law, which it was no part of Christ's mission to destroy. Instead, he fulfilled it by practice and precept, magnifying the law as prophecy had foretold. Even in death he rested the seventh day in the tomb, taking up his work afresh on the first day of the week. Paul followed his Lord by stating that "Circumcision is nothing and uncircumcision is nothing, but the keeping of the commandments of God is everything" (1 Cor 7:19). The New Testament opposes the moral law as a method but never as a standard.

So, in the Sabbath law we have a precept for all time. Interestingly enough, everybody admits to some of it. Some pick out that part of the fourth commandment which says we should work six days. Others emphasize that one day in seven should be for rest. One thing is certain, we can no more abolish the rest day than the six working days. But man does nothing regularly for which he has not a regular time, and thus the authority of God in hallowing the seventh day was a necessity.

The Sabbath illustrates concepts which must be embraced by all who would make life worthwhile. It teaches restraint, temperance, self-control, proportion, perspective, the need for limits, change, variety, and rest. It underlines the truth that this world is only a hemisphere needing the complement of heaven, and that man is only a half hinge requiring God. The fourth commandment, like the other nine, calls upon man to reflect his Creator rather than try to dislodge him. When Toynbee affirmed that all the chief questions facing civilization are religious because its choices depend upon its beliefs, he was only echoing the wisdom of Scripture and its emphasis upon that institution which alone gives man time and opportunity to learn who he is and how he should behave.
There is only one regular day that God told us to remember, and that is the one most men have forgotten. Exodus 20, verse 8 says, “Remember the Sabbath day to keep it holy.” God has already made the Sabbath day holy, and we either profane it or we keep it. There is no other option.

According to Jesus, the Sabbath was made for man-for his good, for his benefit, for his blessing (see Mk 2:27). The Sabbath is one of the two institutions of Scripture declared to be honorable. The other is marriage (see Is 58:14 and Heb 13:4).

Were all days the same, life would be an unending round of monotony. Consider what life would be like if we did not have the night to sleep, and we worked on and on and on! Life without a Sabbath is somewhat like that. God offers us 52 spring days a year, and a life without a Sabbath is like a homestead without a garden, or a face without a smile.

Do not make the mistake of thinking that the Sabbath day is just for churchgoing. It is for that certainly, but it's for more than that. It's time with the family and with friends and with nature. It’s a time for reading things that lift one's thoughts heavenward. It's an opportunity for special service to people in special need. We read in the Gospels that for Jesus the Sabbath was a day of good works as well as worship and social fellowship.

The Test of Our Perception of the Invisible World

The Sabbath day is the rest day, it is the blessed day, therefore, it is the best day, and in one sense it is also the test day. Even in Eden man was tested as to his obedience as Genesis 2:16, 17 makes clear. The answer of a good conscience towards God is ever integral for health. True Sabbath observance as the acknowledgement of the unseen has always been a test for busy self-important man. Will man stop his feverish activity towards worldly goals by this holy intermission or will he not?

The Sabbath is also the church day. Moody rightly said that if the Sabbath goes, the church will go, and then the family will go, then the nation will go. Calvin said the same. So the Sabbath is the church day and the family day. Many a child might never see his father if not for the Sabbath day, and too many of us fail to see the face of our heavenly Father because we neglect these blessed moments of Paradise. Learn to see in the physical rest of the Sabbath, a parable of the rest of heart we have all the time, because we trust not in our deeds but in the finished work of Christ.

As we survey the Genesis story and look at God's creation, there are many other clues useful to the student of preventive medicine. Would not Adam and Eve have laughed often as they watched monkeys and squirrels and kittens and a hundred other features of the animal creation? We were meant to laugh. Laughter is a sort of internal jogging and it is a lifesaver. It is one of the best remedies for tension and a preventive of stress. We do not know whether our first parents heard angelic choruses as creation took place. Job writes of a time when all the sons of God sang together. But undoubtedly as they listened to the sounds of nature, and then found that they themselves were capable of song, they stumbled upon another privilege of living – music. In the preventive medicine of the future, the right use of music, laughter, and pets will have a far more permanent place than any previous era of the world. Ours is a more stressful age than has ever been known before, and it needs every remedy that God has provided.

SUMMARY

Even in Paradise the Sabbath was necessary. How much more now in this world of tension, pressure, sin and death! For sanity, physical health, and spiritual soundness, we need God above as much as the earth beneath. The Sabbath is the day when we especially are nourished by God through the agencies of worship, family, fellowship, nature, and service.

REFERENCE

1. See The Forgotten Day by Desmond Ford for an extended study of this topic.
CHAPTER 6
The Secret of Disease

Epidemiology is the study of the causes and occurrences of diseases around the globe, and its main conclusion has to do with the cause-effect nature of illness. Disease never comes without a cause. Health, happiness and longevity depend upon immutable laws. Everything we do affects the whole body and the whole life.

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The causes of disease, even though very complex, are not as mysterious as might be supposed. In one way or another, disease is caused by violation of the laws of health, which reduces the vital force of the individual to a place where his body reacts unfavorably to the demands made upon it.

Harold Shryock, M.D. *Happiness and Health*, p. 23

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... Each type of insult – microbial invasion, chemical damage, physiological stimulus, or psychic event – can have many different effects depending upon the state of the recipient individual.


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... The Bible is God's will in words, in formal thoughts, in grace. *Nature is God's will in matter and tissue and force. Nature is not often considered a part of God's will. But it is a part, and a great part, and the first part.* And perhaps one reason why some never know the second is because they yield no full obedience to the first. God's law of progress is from the lower to the higher; and scant obedience at the beginning of His will means disobedience with the rest. *The laws of nature are the will of God for our bodies. As there is a will of God for our higher nature – the moral laws – as emphatically is there a will of God for the lower – the natural laws. If you would know God's will in the higher, therefore you must begin with God's will in the lower: which simply means this – that if you want to live the ideal life, you must begin with the ideal body. The law of moderation, the law of sleep, the law of regularity, the law of exercise, the law of cleanliness – this is the law or will of God for you. This is the first law, the beginning of His will for you. And if we are ambitious to get on to do God's will in the higher reaches, let us respect it as much in the lower; for there may be as much of God's will in minor things, as much of God's will in taking good bread and pure water, as in keeping a good conscience or living a pure life. Whoever heard of gluttony doing God's will, or laziness, or uncleanness, or the man who was careless and wanton of natural life? Let a man disobey God in these, and you have no certainty that he has any true principle for obeying God in anything else.*

Henry Drummond (Author of *The Greatest Thing in the World*), *The Ideal Life*, pp. 263-265.

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The World View

There is a big word – epidemiology – that embraces a big secret. It means the study of the causes and occurrences of various diseases, not just locally but globally.

Mankind through epidemiology has found that not all people across the world suffer from the same diseases. The dominant forms of cancer in the USA are not those of India; and cardiovascular disease which inflicts death on every second person in the USA has been a rarity in Japan for most of the twentieth century. Third World countries in their rural populations reveal only a trifle of the incidence of our leading diseases.

Here in the USA we suffer from the diseases of affluence. The mortality toll is mainly a result of our materialism. Let none think that because we lead the world in many respects, we also lead in matters of health. A study last decade says:

> Although it is difficult to measure the quality of health and medical care, a few standard measures are helpful. Life expectancy, the number of years a person can be expected to live, is at least a crude measure of a nation's health. According to United Nations data, the U.S. ranks nineteenth among nations in life expectancy for males and ninth for females. Infant mortality, generally taken to mean infant death in the first year, is one of our best indicators of health and medical care (particularly prenatal care). The U.S. ranks fifteenth in infant mortality, behind such countries as Sweden, Finland, Canada, Japan, the German Democratic Republic (East Germany), and the United Kingdom (United Nations Demographic Yearbook, 1974).

Sowing and Reaping

Epidemiology demonstrates that "... the curse causeless shall not come" (Pr 26:2).

Disease *never* comes without a cause. All our happiness, and all our sorrow, can be traced to obedience or disobedience to natural law. Don't misunderstand that – we didn’t say that all of our sorrows could be traced to our *personal* disobedience.

Sometimes we reap what others have sown. The sins of the fathers, at times, are visited upon the children even to the third and fourth generation. Modern research in Russia at the moment is very absorbed in the impact upon children made by alcoholic parents. In that country, like our own, alcoholism is epidemic and the influence of this disease is most devastating upon those who are innocent, namely the children. This is one of the facts of life and cannot be denied. Undoubtedly, in the great hereafter, the Great Judge will compensate those who have had the balances so weighed against them here in this life. But meanwhile all have to make the best of what they have inherited.
Having admitted that some of our diseases are the result of heredity, we must hasten to add that these are a minority. For the majority of us, most of our physical ills are a result of our personal disobedience to divine laws. The law of God is written on every nerve, sinew, and fiber of our being. He or she who knowingly violates these laws would just as wantonly break the laws of the Decalogue. Health, happiness, and longevity, depend upon immutable laws, not upon happenstance.

In a recent series of articles on physical well-being in a secular journal, the high point was the statement that "Everything we do matters. Everything we do affects the whole body and the whole life." How true this is! Today we sow, tomorrow we reap. We will reap what we sow, and more than we sow. There will be a time lag between our sowing and our reaping, and ignorance about the seed makes no difference. Today is yesterday's judgment day. I am what I am in body, mind, and soul, because I've been doing what I've been doing.

The Bible admonishes us to look carefully to our habits. Paul writes, "... let us cleanse ourselves from all filthiness of the flesh and spirit, perfecting holiness in the fear of God" (2 Cor 7:1). This is impossible without a conscientious examination of our habits. In 1 Corinthians 11:28-30 Paul says about certain irreverent people that, because of their failure to examine their ways, many were infirm and sickly and others had died prematurely. Scripture admonishes "Let us search and try our ways" (Lam 3:40). "In all thy ways acknowledge him, and he shall direct thy paths" (Pr 3:6). "Take heed to the path of your feet, then all your ways will be sure" (Pr 4:26 RSV). The whole of the book of Proverbs is a series of warnings regarding our habits. In this Bible book, especially addressed to the young, good habits are associated with life, and bad habits with death. Consider Pr 12:28 (RSV): "In the path of righteousness is life, but the way of error leads to death." The same writer declares, "The fear of the Lord is a fountain of life, that one may avoid the snares of death" (Pr 14:27 RSV). And chapter fifteen speaks similarly, "The wise man's path leads upward to life, that he may avoid Sheol [the grave] beneath" (Pr 15:24 RSV).

What can motivate us to an examination of our habits and practices? Only the realization that "... you are not your own; you were bought with a price" (1 Cor 6:19; 20 RSV). The doctrine of Christian stewardship underlies all behavior for the believer. The Christian will not choose clothes that pamper pride, or foods which meet the needs of appetite rather than health. The believer must refuse to rust out by inaction or wear out prematurely by intemperate labor. Even a Christian's thoughts belong to God. The same book of Proverbs tells us, "Keep [guard] your heart with all vigilance; for from it flow the springs of life" (Pr 4:23 RSV). The recipe for Christian thinking is found in Php 4:8 RSV: "... whatever is true, whatever is honorable, whatever is just, whatever is pure, whatever is lovely, whatever is gracious, if there is any excellence, if there is any praise, think about these things."

**The True Christian Is Always a Nonconformist**

The Christian will not be guided by the traditions, customs, and fashions of ungodly society. No true Christian is a conformist and every true Christian will be conspicuous in the workplace, in the home, and along the way. Disease is prevalent in modern society because men and women act as though they are their own. They seek to gratify appetite, passion and pride rather than God the Great Judge. Because of boredom, worldlings seek thrills at whatever cost to the body, mind, and soul. The Christian cannot behave so. The Christian will not dress, eat, work, mate like those who know not Christ. We are meant to be the salt of the earth, a light set upon a hill, a lifeboat saving wrecked lives.

Does all this sound hard or harsh? It is the way devised by infinite love to bless us. For example, think of the typical life of a young man who follows his peers. If such a person had lived just after World War II, almost certainly he would have become a smoker and a drinker. Gambling and impure practices would have been part of his amuse-ment program. Within a decade or two marijuana may have become a habit. And after another decade or so, perhaps cocaine. His diet would probably have consisted of a great amount of fast foods, and cholesterol-laden animal products with excessive meat and dairy products habitually consumed. He might have played an odd game of softball or tennis, but regular disciplined exercise would be out of the question. Such a person would be no worse than any other typical young person of the era, but think of the whirlwind soon inevitably to be reaped. If a heavy smoker, almost unavoidably, he will forfeit one to two decades of life. If a heavy drinker, the likelihood of suicide is multiplied fifty-eight times; cirrhosis of the liver twelve times; heart disease, twice, and so on. If a heavy consumer of animal products with a diet lacking in fiber, he will probably have diverticulitis in his late forties and possibly colon cancer in the fifties. The chances are at least one in two that he will suffer a heart attack long before his body was intend-ed to wear out. Now, how much joy is there in all of that?2

Is the Christian way one of self-sacrifice? Yes, but only in the sense of denying ourselves that which would do us harm. God does not ask us to give up anything. He calls upon us only to exchange. He asks "... what shall a man give in exchange for his soul?" (Mt 16:26). Get that firmly imbedded into the mind. This is the true philosophy of so-called Christian self-sacrifice. We sacrifice that which would take us down to hell and lead us through purgatory in this life. We sacrifice lesser things in order to receive better and greater things. We give up baubles for diamonds and surrender paste in order to get pearls. There is a price to pay, but the price is wonderfully inexpensive. In fact, as we look to Christ on his cross, the desire to do the right is the inevitable result of beholding him who loved us and gave himself for us. Self-discipline then becomes a privilege, not a burden. Furthermore, it is Christ who works with us and in us by his Spirit "... to will and to do of his good pleasure" (Php 2:13). The Christian life is the supreme adventure and the supreme privilege.

**Christian Discipline**

Consider how many references there are in both the Old and New Testaments to self-discipline. Self-discipline is the fruit of a right relationship with God (see Gal 5:23), from which good health springs.

**The Discipline of Temperance**

Philippians 4:5: Let your moderation be known unto all men.

Acts 24:25: And as he reasoned of righteousness, temperance [self-control], and judgment to come, Felix trembled, and answered, "Go thy way for this time; when I have a convenient season, I will call for thee."

1 Corinthians 9:25: And every man that striveth for the mastery is temperate in all things.
Proverbs 25:16: Hast thou found honey? eat so much as is sufficient for thee, lest thou be filled therewith, and vomit it.

2 Peter 1:5, 6: And beside this, giving all diligence, add to your faith virtue; and to virtue, knowledge; and to knowledge, temperance.

Discipline as Regards the Use of Alcohol

Isaiah 5:11: Woe unto them that rise up early in the morning, that they may follow strong drink; that continue until night, till wine inflame them!
Proverbs 20:1: Wine is a mocker, strong drink is raging: and whosoever is deceived thereby is not wise.
Habakkuk 2:15: Woe unto him that giveth his neighbor drink, that putteth thy bottle to him, and makest him drunken also.
Romans 13:13: Let us walk honestly, as in the day; not in rioting and drunkenness; not in chambering and wantonness, not in strife and envying.
1 Corinthians 6:10: Nor thieves, nor covetous, nor drunkards, nor revilers, nor extortioners, shall inherit the kingdom of God.
Ephesians 5:18: And be not drunk with wine, wherein is excess.

Discipline of Appetite

Proverbs 23:1, 2: When thou sittest to eat with a ruler, consider diligently what is set before thee: and put a knife to thy throat, if thou be a man given to appetite.
Ecclesiastes 10:17 (RSV): Happy are you, O land, when ... your princes feast at the proper time, for strength, and not for drunkenness!

Discipline of the Passions

Exodus 20:14 (RSV): You shall not commit adultery.
Matthew 5:27, 28 (RSV): You have heard that it was said, "You shall not commit adultery. But I say to you that every one who looks at a woman lustfully has already committed adultery with her in his heart.
1 Corinthians 6:18 (RSV): Shun immorality. Every other sin which a man commits is outside the body; but the immoral man sins against his own body.
1 Corinthians 6:9 (RSV): Do you not know that the unrighteous will not inherit the kingdom of God? Do not be deceived; neither the immoral, nor idolaters, nor adulterers, nor sexual perverts....
1 Corinthians 6:13 (RSV): ... The body is not meant for immorality, but for the Lord, and the Lord for the body.
1 Corinthians 6:15: Know ye not that your bodies are the members of Christ? shall I then take the members of Christ, and make them the members of a harlot? God forbid.

Job 31:1: I made a covenant with mine eyes; why then should I think upon a maid?

Discipline of the Tongue

James 3:2: ... If any man offend not in word, the same is a perfect man, and able also to bridle the whole body.
James 3:10: Out of the same mouth proceedeth blessing and cursing. My brethren, these things ought not so to be.

Discipline of Our Fears

1 Peter 5:7: Casting all your care upon him, for he careth for you.
Philippians 4:6 (RSV): Have no anxiety about anything, but in everything by prayer and supplication with thanksgiving let your requests be known to God.

Discipline of Anger

Psalm 37:8: Cease from anger, and forsake wrath: fret not thyself in any wise to do evil.
Proverbs 14:17: He that is soon angry dealeth foolishly. Proverbs 14:29: He that is slow to wrath is of great understanding: but he that is hasty of spirit exalteth folly.
Proverbs 16:32: He that is slow to anger is better than the mighty; and he that ruleth his spirit than he that taketh a city.
Proverbs 25:28: He that hath no rule over his own spirit is like a city that is broken down, and without walls.
James 1:19, 20: Wherefore, my beloved brethren, let every man be swift to hear, slow to speak, slow to wrath: For the wrath of man worketh not the righteousness of God.

It cannot be emphasized too much that all God's commandments are whisperings of love. Our heavenly Father desires to save us from unnecessary pain.

If all this sounds too abstract, let me bring you back to a concrete illustration of the wisdom of the abstinence enjoined upon the Christian. In 1912, lung cancer was called "the rarest of diseases." Now in the 1980s, over 1,000 persons a day die of tobacco-induced diseases in the USA alone. More than one in five die from cancer and approximately one-third of these die of cancer of the lung. And remember that 90 percent of people who smoke are addicted and wish they could give it up. They are
smoking against their own wishes. Only the gospel of Christ brings power to conquer our vices. For another illustration remember what was mentioned earlier, that nowadays one in four between fifteen and fifty-five years of age will contract a sexually transmitted disease. Surely God's ways, and his ways alone are ways of pleasantness and peace.

My son, forget not my law; but let thine heart keep my commandments: For length of days, and long life, and peace, shall they add to thee. Trust in the Lord with all thine heart; and lean not unto thine own understanding. In all thy ways acknowledge him, and he shall direct thy paths. Be not wise in thine own eyes: fear the Lord, and depart from evil. It shall be health to thy navel, and marrow to thy bones. Happy is the man that findeth wisdom, and the man that getteth understanding: For the merchandise of it is better than the merchandise of silver, and the gain thereof than fine gold. She is more precious than rubies: and all the things thou canst desire are not to be compared unto her. Length of days is in her right hand; and in her left hand riches and honour. Her ways are ways of pleasantness, and all her paths are peace. She is a tree of life to them that lay hold upon her: and happy is every one that retaineth her. (Pr 3:1, 2, 5-8, 13-18)

SUMMARY

Disease is never accidental. All happiness and all sorrow can be traced to obedience or disobedience to natural law – though not necessarily our own personal obedience and disobedience.

The Bible admonishes us to look carefully to our habits.

Of these habits, those that have to do with eating, drinking, moving and thinking are the most important.

The Scriptures tell us that self-control is one of the fruits of the Spirit and it is a fruit that is emphasized throughout the Old and the New Testaments.

All God's commandments are the whisperings of love and express his desire to save us from unnecessary pain.

REFERENCES

A. Williams, "Increased Blood Cell Agglutination Following Ingestion of Fat, a Factor Contributing to Cardiac Ischemia, Coronary Insufficiency, and Anginal Pain," Angiology 8 (1957):29.
See also Dr. John McDougall's books: The McDougall Plan and A Challenging Second Opinion, which cite the above studies and many more.
**CHAPTER 7**

It's Not the Size of the Dog in the Fight...

*Disease is a matter of seed and soil. That is to say, not just bacteria or viruses determine our state of health, but the condition of our immune system. The enhancing of personal immunity to disease has become a priority of medical researchers, especially in view of AIDS.*

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Less than 10 percent of the difference in health between any two Americans is determined by the care delivered by physicians. More than 90 percent results from factors beyond medicine's control: your genetic background; the healthfulness of your environment; and, most important, how you live – what and how much you eat, your drinking and smoking habits, how much you exercise, how you relax.

Your genetic heritage may determine your body type and facial features, but it rarely is a direct cause of illness.


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**The Truth Is Never Pure**

Things are seldom what they seem. Truth is rarely on the surface. "The truth is never pure and only rarely simple." That is to say, all our knowledge is tainted with error. Suppose you had never seen a watch before and one was presented to you, and you were asked to theorize regarding what was beneath the glass, and between the face of the watch and the covering metal at its back. After much thought you could come up with a hypothesis suggesting what was in the unseen recesses of the watch and its relationship to the watch face. Your theory might seem to be consistent, but it is most unlikely that it would represent the whole truth about the contents of the watch. So it is with all theories regarding disease.

For about one hundred years we have been devoted to the germ theory of disease. This is not a superstition. It has to do with facts. All sickness is a matter of seed and soil. The soil is the human organism, the seed includes those microorganisms which, if sufficiently abundant or virulent, overwhelm the soil and bring devastation. But in having spoken of both seed and soil, we are saying there is more to disease than just "catching" germs.

Whenever an epidemic is raging, there are multitudes of people who nourish within them the microorganisms identified as the cause of the epidemic who yet do not themselves become ill. During the last century there were millions of people who had the tubercle of T.B. but did not become ill with T.B. It is certain that there were millions who had some slight degree of tuberculosis who were never diagnosed as having that disease. It did not hamper their activities or cramp their style in any significant way whatever.

Why is this important? It is important because if we consider that the seed is the only factor in disease, then we will neglect the soil which may be much more important. Today, when research workers talk about this problem, they refer to the immune system. That is just a technical way of referring to the quality of the "soil." We have long heard that it is not the size of the dog in the fight, but the amount of fight in the dog that determines the outcome of many an encounter. So it is with disease. It is not the amount of microorganisms necessarily that determine whether the host becomes sick. More often (to change dogs) it is the condition of the host. Is the host continually fatigued, continually distressed in mind, continually emotionally disturbed, poorly fed, etc.?

The greatest novel ever written is *War and Peace*, by Leo Tolstoy. Linked with the novel is an essay by Tolstoy in which he decries the determinism used to explain the sequence of events. Tolstoy did not believe that the events of 1812 could chiefly be explained by Napoleon Bonaparte. In Tolstoy's epilogue he warns that the historian works under an illusion, the illusion that he can deal with the facts of the past in a scientific manner and fully explain them. The historian pretends that his knowledge of circumstances enables him to trace the rationale behind the crises of history. But, says Tolstoy, in reality, this historian is only selecting and emphasizing those factors which agree with his own prejudices. Military commanders, such as Napoleon, do not determine the outcome of history. War is very complex and involves social factors, economic factors, personal ambitions, political doctrines, and much more besides. According to Tolstoy, the real causes of what happens in history are beyond our reach.

**The Importance of the Immune System**

One of the most distinguished scientists in America, Dr. Rene Dubos, long associated with the Rockefeller Institute for Medical Research, professor at Harvard, in a famous work entitled *The Mirage of Health* embodied the thesis of Tolstoy and applied it to human environment and disease. Dubos draws from Ireland's potato famine an illustration to further the thesis. He speaks about a microscopic fungus which once preyed upon the potato in its native habitat — the Andes. In the Andes, both the fungus and the wild potato survived in a state of ecological equilibrium. But in Ireland, about 1845, that equilibrium was disturbed by unusual weather of chilling rain and fog. The potato harvest failed.

At that time a famous botanist, John Lindley, affirmed that bad weather had caused the potato plants to become saturated with water, and being unable to get rid of that excess had contracted a kind of dropsy and subsequent putrefaction. But a naturalist, the Rev. Miles Berkeley, who knew much about the habits of fungi, held a different view. He connected the potato disease with the mold on the affected tissues.

Lindley believed that Berkeley was giving too much importance to the mold. He declared:

> As soon as living matter lost its force, as soon as diminishing vitality took the place of the customary vigor, all sorts of parasites would acquire power and contend for its destruction. It was so with all plants, and all animals, even man
himself. First came feebleness, next incipient decay, then the springing up of myriads of creatures whose life could only be maintained by the decomposing bodies of their neighbors. Cold and wet, acting upon the potato when it was enervated by excessive and sudden growth, would cause a rapid diminution of vitality..."³

This discussion, recorded in a journal in England known as *The Gardiner's Chronicle*, was a preview of medical controversy decades later in France, when Pasteur brought forth his view of disease. Pasteur, Koch, and their followers, found they could produce disease at will in experimental animals which they infected with microorganisms. The results brought widespread conviction among scientists and physicians of the world, but sadly such experiments underplayed the importance of the many other factors that influence the development of disease.

Returning to the illustration by Dubos. The potato fungus had existed in connection with the plant since its importation from Central America. Only unusual weather conditions enabled the fungus to take over. The potato blight resulted in famine and a million persons died of starvation. Those who survived found themselves much more susceptible to infectious diseases and it was then that the great epidemic of tuberculosis began, only to terminate in the twentieth century. Dubos summarizes as follows:

Thus, all sorts of accidents played their part in linking tuberculosis – the Great White Plague of the nineteenth century – to a fungus living on the wild potato in Central America. The change in ecological relationship between fungus and potato that occurred when the latter was removed from its native habitat and was "improved" for human consumption; the disturbance in the internal physiology of the potato caused at a critical time by unusual weather conditions; biological and cultural urges which brought about the rapid increase in the Irish population during the first part of the nineteenth century – all these forces and many social factors that cannot be discussed here played an essential part in transforming Pat the Irish pig tender into a New York City cop.²

Dubos' illusion to the New York City cop is a reference to the fact that the Irish famine caused many to leave the shores of their native land and become Irish immigrants in the USA, particularly in the cities of Philadelphia, New York, and Boston.

We are emphasizing that disease, like most human crises, is multifactorial in origin. We err if we reduce sickness just to the matter of catching a "bug." Many textbooks talk about "initiating," "exciting," or "immediate" causes of disease and they also speak of "contributory" causes. Dubos suggests that more useful would be the recognition of "predisposing causes, precipitating causes, perpetuating causes" (p. 90). This wide range of adjectives at least concedes that there is more to disease than merely the invasion of microorganisms.

The last part of the twentieth century will probably be devoted in the medical world to a deeper understanding of the immune system and how to increase the quality of the body's defenses, especially in view of AIDS.

The Relationship between the Immune System and Preventive Medicine

No one among us perceives to any degree the wonders of the human organism. It contains about 300 trillion cells. In each cell there is something like 50,000 genes. Each cell contains as much by way of facts governing the physiology of the body as the whole of *Encyclopedia Britannica* contains facts about the world and man. One great research scientist expressed his awe at the fact that the head of a spermatozoon contains much more information than all the *Annals of Clinical Medicine*. This body of ours produces millions of different antibodies, each one of which is designed to attack a specific invader and protect the host. The immune system which controls these millions of antibodies operates on a 24-hour alert to recognize invading foreign microorganisms. It has its own memory and records of all previous invasions of the body and the "soldiers" that sprung up as a result of such invasions.

We have no intention of going into detail about T cells, lymph nodes, the spleen, bone marrow, thymus, tonsils, adenoids, appendix, B cells, lymphokines, granulocytes, macrophages, monocytes, antibodies, etc. All these are prominent terms in any thorough discussion of the immune system. The practical problem is not that of understanding the minutia regarding how the body's immune system works, but rather how to strengthen that system that it may be enabled to do its best in resisting disease.

The whole of this book is on that topic. For when we talk about strengthening the immune system, we are actually talking about preventive medicine. The great thesis of our pages has been that of Christ that "What God has joined together, let not man put asunder."

God has made a very complex body for a very complex world. And when men forget the complexities and focus upon the single aspect of the seed of disease, forgetting the soil, again they are violating Christ's principle.

One only needs to glance at the first few pages of Scripture to find the necessary clues for preserving the health of our immune system. There we read about humanity's relationships to heaven and earth, which include the right relationship to the Father, the Spirit, and the Son – the Living and the Written Word – to the things of creation, sunshine, air, water, food, and to the duties given man by his Creator – work, rest, worship. Much more on that topic will appear in later pages.

When we forget that the law of God is written in nature as well as in Scripture, when we forget that the divine law is inscribed on every nerve, fiber and cell of the human organism, then we are in danger. We repeat that disease is not casual, it is causal, it does not come by chance but usually by choice. We are generalizing of necessity, and we do not forget that the sins of the fathers are often visited upon the children to the third and the fourth generation. We do not forget that many have had unfavorable environments in the early years as well as unfavorable hereditary backgrounds. But in most cases, the casting vote as regards disease and destiny is our own.

The worst influences of heredity, in most cases, result in a predisposition rather than disease itself. Inasmuch as nobody has a perfect hereditary background, and none of us had a perfect environment in infancy and childhood, it is important to do what we can to manipulate our present, immediate environment. This means that, in harmony with the repeated admonitions of Scripture to examine our habits, we should constantly review every practice of our lives. We must ever be reasoning from cause to effect and not act like the heathen who blame all unpleasant things on chance. Chance is atheism. "The curse
causeless shall not come" says Scripture. Usually it is our own personal bad habits which weaken our immune system and invite disease.

Friends and Enemies of the Immune System

Let us consider some examples. The person who forgets that God gave him about 650 muscles and who spends most of his day sitting or reclining, cannot but be disposed towards gloom and pessimism. It is impossible to think clearly, purely, or optimistically, unless we are physically active. The brain weighs only about 2 percent of the body’s total weight, but it consumes about a quarter of the oxygen intake of the body. It is eight times more dependent upon oxygen than any other organ. When the blood is allowed to pool within the abdominal organs and the mind is starved for oxygen because there is no vigorous circulating blood, then gloom is practically inevitable and frequently with gloom comes irritability. A person who exercises vigorously, increases his oxygen intake up to twenty times or more and consequently benefits in mind as well as body.

If a sedentary person is content to dwell indoors day-by-day in office and home, and rarely walks under the open heavens to fill his lungs with the air that circulates in God’s out-of-doors, then that person is depriving himself of the electrical vitality that is found only when exposed to God’s great natural amphitheater of creation. Most homes in America, because of the energy crisis of other years, have poor circulation of fresh air. This is true of many offices also. While the body can withstand such year after year, it does not function nearly as effectively as it could with better ventilation.

Now add to such factors the habits of eating junk foods, processed foods, foods rich in fat, salt, and sugar. Refined foods lack essential nutrients of vitamins and minerals. Without the B vitamins the nerves cannot function properly and irritability, tenseness, and a feeling of "lostness" is almost inevitable. Without abundant vitamin C and A infection cannot be resisted. Without proper amounts of the trace elements of chromium, potassium, magnesium, etc., heart health cannot be long sustained.

People who live almost entirely on cooked food and who consume "cooked" overheated air, will always lack vitality. And in lacking vitality, they lack resistance to life’s stresses and to the invasions of microorganisms. Their "soil" becomes poor and vulnerable.

Stress is one of the great precipitating factors of disease. The more unfortunate changes we experience the less our resistance to disease. A person who is unhappily married, doesn’t enjoy his or her daily work, is a good target for sickness. On the other hand, happiness is one of the best protective agencies. A contented mind is better than all the medicines physicians can prescribe. But only those can resist stress avert, who have faith to believe that in all things God is working for good to them that love him and that he will do all things well, and that ultimately all will be very well. Faith, hope, and love are not merely spiritual gifts, they are the necessary ingredients of a healthy, happy existence. Without faith, hope, and love one sinks to the level of the brute. As regards tendency to sickness, one sinks much lower still, for we alone were made in the image of God and cannot function aright without the characteristics of that image.

What we love is the most important thing about any of us. We usually love most what gets our attention most. Whatever gets our attention gets us. So the man who is absorbed in making money rarely makes his contribution aright to a good immune system. He is so fascinated with wealth that usually health is forgotten. A person absorbed in sexual pleasure who forgets that sex is, so to speak, a garnish to life and not the main dish, a cream that should not be taken without the milk, a pleasure that was meant always to be linked with responsibility, that person too invites disease and death. One in every four people between the ages of fifteen and fifty-five in this generation contracts venereal disease.

It goes without saying that intemperate people and people who indulge in tobacco and alcohol tempt illness. But it is too often forgotten that the person who indulges in negative emotions of fear, hate, covetousness, discontent, worry, etc., is also inviting disease. We are violating the law of our being. God is love and we are made in his image. Smiley Blanton was correct when he titled his book Love Or Perish. Read the promises in Isaiah 58. There God declares that those who refuse to be wrapped up in themselves, who deny their self-centered natures, who instead minister to others, these and these alone will find lasting health. Notice the words of Scripture:

Is not this the kind of fasting I have chosen: to loose the chains of injustice and untie the cords of the yoke, to set the oppressed free and break every yoke? Is it not to share your food with the hungry and to provide the poor wanderer with shelter – when you see the naked, to clothe him, and not to turn away from your own flesh and blood? Then your light will break forth like the dawn, and your healing will quickly appear; then your righteousness will go before you, and the glory of the Lord will be your rear guard. Then you will call, and the Lord will answer; you will cry for help, and he will say: Here am I. If you do away with the yoke of oppression, with the pointing finger and malicious talk, and if you spend yourselves on behalf of the hungry and satisfy the needs of the oppressed, then your light will rise in the darkness, and your night will become like the noonday. The Lord will guide you always; he will satisfy your needs in a sun-scorched land and will strengthen your frame. You will be like a well-watered garden, like a spring whose waters never fail. (Is 58:6-11)

Yes, it’s not the size of the dog in the fight, it’s the amount of fight in the dog. It’s not whether you are naturally beautiful, or talented, or strong. The vital issue is whether by good habits and obedience to natural law you have strengthened your immune system in such a way that all invading microorganisms will find such a powerful resistance that their victories are unlikely.

SUMMARY

"The truth is never pure and only rarely simple." That is to say, all our knowledge is tainted with error. This particularly applies to traditional usage of the germ theory of disease. Largely correct though it is, it has ignored the importance of the body soil, our immune system.
The issue of vital importance in sickness is not just the matter of what disease a person has, but what sort of person has the disease. The condition of the host is usually of at least equal importance to the matter of invading microorganisms.

One illustration of this is the potato famine in Ireland last century. Not just the potato fungus, but the unusual weather conditions led to the ultimate tragedy.

We gain our best hints about enhancing our personal immunity from the scriptural story of creation. Immunity is the result of right relationships with the natural elements of air, sunshine, water, food, and with God and man. These include worship, rest, and service.

REFERENCES
2. Ibid.,
CHAPTER 8

The Heart of Preventive Medicine

The Bible places much stress on the importance of right relationships: to God, our neighbor, and things. Each is to be granted its proper priority. Such wisely ordered relationships are the route to good health. The Bible's marriage principle – "What therefore God hath joined together, let not man put asunder" (Mk 10:9) – is a principle that can also be applied in other fields, with great benefit for our health. The Creation Story suggests a pattern which, if followed, could wipe out almost all disease.

* * * *

See, I have set before you this day life and good, death and evil. If you obey the commandments of the Lord your God which I command you this day, by loving the LORD your God, by walking in his ways, and by keeping his commandments and his statutes and ordinances, then you shall live and multiply, and the LORD your God will bless you.

Deuteronomy 30:15, 16 RSV

* * * *

And the LORD commanded us to do all these statutes ... for our good always, that he might preserve us alive.

Deuteronomy 6:24 RSV

* * * *

The Heart of Preventive Medicine As Set Forth by Scripture

God wants his children to live the abundant life, with health abounding and joy overflowing; but has he told us how it is to be done? Yes. Both the Code from Sinai and the Sermon on the Mount make it clear that life at its best is only possible when right relationships are preserved with God, our neighbor, and the material world.

The Decalogue urges upon us a hierarchy of values beginning with God, then parents and family, neighbors, and finally things. "Things" come into particular focus only in the last of the Ten Laws, thus reversing much of modern practice which puts material things first, and God last. All of the commandments of the second table are protective. The sixth commandment protects life, the seventh – purity, the eighth – property, the ninth – reputation, the tenth – the mind. Observe: both the beginning and end of the Decalogue specially have to do with the mind. Those who obey the opening words of the Decalogue give God his right place. Those who seek first God's kingdom and his righteousness find both. They also have all other necessary and blessed things added (see Mt 6:33).

The Sermon on the Mount covered similar ground to Sinai, yet at a time when the historical setting and customs were different. Only human nature remained the same. Christ pleaded that men would only do right if they were first right in character. Thus the Beatitudes introduce the Sermon and stress, not conduct primarily, but heart and mind. In other words, Christ enlarged the first four commandments of the Decalogue, which required mankind to have a wholesome relationship with God. Through that relationship a person would be equipped in character to discharge all other duties. We quote Dr. R. Harrison:

His ministry, therefore, was as much to the mind as to the body. His precepts in the Sermon on the Mount and elsewhere dealing with human motives and the deep workings of the mind show by implication that he was acutely aware of the place emotional conflict, resentment, fear, anxiety, hatred, and the like had in the genesis of disease. So much is this the case that it has been said in recent years that the most assured findings of modern psychiatry constitute but one small part of the distilled wisdom contained in the Sermon on the Mount.1

The Human Body: A Diagram of the Way to Health

We move from this biblical evidence on the priority of right relationships to the suggestion that the human body itself gives us a diagram of the route to health. Look at Adam from the top down. His noble forehead comes first, suggesting what he thinks, believes, and loves (reflecting in some slight degree the image of God). Next come his organs of sense (eyes and ears), more devoted to feeding his mind and soul than to feeding his body. Then come lungs and heart. These vital centers of his being sustain the furnace fires by the processing and transport of oxygen to every cell of the body, that food might be utilized and action made possible. To care meticulously for the lungs and heart is one of the primary duties of every responsible being. Pure air is even more important than good food.

Next, look at Adam's middle, housing among other organs, his stomach. Death is mainly eat. Look at that again d-EAT-h. But life, too, is mainly what we eat. What we eat and drink today, walks and talks tomorrow.

It's a very odd thing –
As odd as can be –
That whatever Miss T eats
Turns into Miss T.

(Walter De La Mare)

Now consider those muscular and sinewy legs of Adam. Eve's may be more attractive, being made for beauty as well as work, but Adam's tell of strength. If today you want to know the condition of the mind of most people, just feel the calves of their legs. Many who study longevity believe the length of life to be, in individual cases, proportionate to the distance covered by use of the legs. With the body largely composed of over 600 muscles, we were made to exercise, and that vigorously (if in good health), and daily. In summary: right thoughts, right air, right food and water, right exercise, and rest are the constituents of health for the whole person.
Scripture's Opening Pages Reveal All of the Essentials for Health

These ingredients of health are again suggested by the very opening chapters of Scripture. In presenting man as made from the earth (Gn 2:7), emphasis is placed on his continual dependence on the elements of earth: water, sunshine, air, food. Also introduced at the opening of divine revelation are Adam's relationships with his Maker, his mate, and the animals. Even the account of the seventh day proclaims that man must not try to live by bread alone, and that his greatest need is fellowship with his Creator. When one recalls that at least 70 percent of ills are classified as psychosomatic in origin, the importance of worship is obvious (see 2 Ti 1:7). In God is all light and life, and we live and see aright to the degree that we are abiding in him. Yes, right relationships are the very essence of the biblical view of life, and therefore the very essence of health. Throughout Scripture there are other helpful hints bearing on preventive medicine. Preventive medicine therefore has biblical priority over diagnostic and curative therapy (without denying the right place of such therapies – see the preceding chapter).

One principle, hinted at on the very first page of Scripture and illustrated throughout all its pages, was only formally proclaimed by Christ when dealing with the most important of human relationships – marriage. "What therefore God hath joined together, let not man put asunder" (Mt 19:6). While Christ is here warning against divorce, the principle behind the warning is a summary of the essence of Scripture: a call for wholeheartedness in the service of God. Jesus reminds us of an approach to life which is also at the heart of preventive medicine: What God has joined together, we are not to separate. This approach Christ found at the very opening of Scripture. There is a divine pattern planned by the Creator, and interwoven into all creation. That pattern must be adhered to if we are to live life aright, and to the full. God has shown by the creation story that work and rest must go together, the secular and the spiritual, the profane and the sacred. Six days of work, followed by one of rest and worship, point to a rhythm enjoined by heaven which can only be broken – put asunder – at our peril.

All of creation reflects this rhythm principle whereby God has joined together labor and rest. Day and night teach it, the four seasons teach it, and even the cells of the body teach it. For example, the heart and the kidneys function on the principle of the rhythm of work and rest. While some kidney cells function, others rest; and then the shift is changed, so that the cells, formerly resting, begin to work, and those formerly working begin to rest. Woe to the person who tries to sever what God has joined together. All work and no play not only makes Jack a dull boy and Jill a dull girl, but will destroy both Jack and Jill. Those who refuse to participate in regular Sabbath rest will have all their Sabbaths together in that last earthly resting place – premature death. "Come ye yourselves apart ... and rest a while" (Mk 6:31) is Christ's admonition to all who toil.

What God Has Joined Together...

Consider the relationships of heaven and earth, of God and humanity. Some don't mind the second table of the Decalogue but object to the first. Many shout about duties to one's neighbor, but deny the only basis on which such duties can be rightly and universally discharged: prior duty to God. Note how Paul, in Romans 1:18, makes all unrighteousness grow out of ungodliness. He does the same in 1 Timothy 1:9–11. John put it well in his first epistle: "Love is of God, and he who loves is born of God ... He who does not love does not know God" (1 Jn 4:7, 8 RSV). Worship which leads to love is life's primary duty. Emulate Mary before emulating Martha and you will find that better part which will never be taken from you (see Lk 10:42). Life means taking heaven seriously, and making God supreme, as we go about our earthly duties. Let us not put asunder what God has put together.

The principle applies in every area, extending from outer spacious boundaries of responsibility to smaller concentric circles. Take, for example, God's provision for the propagation of the race. He joined sex with responsibility – that is, with marriage. Thus, the Bible opposes fornication and homosexuality. Those who would take their pleasure for a night, at the expense of another human being and God's law of purity, are separating what God has joined together. Sex and responsibility must ever be joined, as surely as cream is linked to coffee. How we live and see aright to the degree that we are abiding in him.

One more illustration: Think of the food we eat (or should I have said, Think of what poses as food in most of the western world?). The great majority of items eaten and drunk by humans in the West would never have been recognized by Adam and Eve as food. There are 60,000 drug, cosmetic, and food companies in the USA busily putting asunder what God joined together. When the human race learned to refine food, to process it, to package it, and then to live largely on their new creation – at that point the race accelerated its suicide and increased its misery. What do we mean? Consider the following from an interview by Alive magazine with Dr. Denis Burkitt and Dr. Hugh Trowell, pioneers in a dietary revolution that may now be saving, or at least prolonging, millions of lives.

Dr Trowell: In my years in Africa I also noticed that the Kenya Africans did not suffer from high blood pressure. It was then that I started to make a mental list of the diseases that were uncommon in Africans but common in Western communities. In considering obesity, I began to realize straightaway that if you eat a typical African diet with a lot of foods rich in fiber, you tend to stay slim for the whole of your life. I worked in East Africa, where there were about 15 million Africans, 25 years before I reported the first case of coronary heart disease! The man was an East African high court judge who ate a Europeanized diet. Another disease we hardly ever saw in Kenya was appendicitis. Denis, as a surgeon, had noticed that during his practice, Denis and I began to correlate this with diet and bowel habits. The Africans' bulky, soft stool is certainly the reason we found almost no diverticulosis over there. It was only seen once in 2,300 autopsies studied in Johannesburg and only twice at Mulago Hospital during my time in Africa. Hemorrhoids and constipation were also very uncommon.
In Africa diabetes is considered to be a "disease of civilization." Among the 5 million Africans in Kenya in the 1930s, only two cases were treated in a five-year period.

I recorded the first case of lung cancer in the inland areas of East Africa among some 10 million people. The patient was the porter at the entrance door to the Government House, and he picked up and smoked the cigarettes that people threw down when they were ushered in to see the governor.

Dr Burkitt:

The biggest advance in medicine in the last century was the recognition that infectious disease was caused by factors in the environment that could be controlled. As a result, infectious diseases were conquered as the major cause of death. It is likely that the chief contribution to medicine in this century is the recognition that our chronic noninfectious diseases also result from factors in the environment that can be controlled. Prevention, not treatment, is really the key to health. And yet over 90 percent of health expenditure in the U.S. goes to treatment and very little to prevention. The United States, the United Kingdom, and 12 other countries have now issued nutritional guidelines. They are all in agreement that we should eat more starch and fiber, less fat, sugar, and salt. But to my knowledge, there has not yet been a conference on the whole enormous concept of diseases of Western culture.

Here are well-known doctors telling us that the major diseases of the West are the result of the refining of food – man's separating what God joined together.

Perhaps you are saying, "Who wants to be a health fanatic? There's no gospel in that. Besides, if one dies of heart disease, the most common of our modern degenerative diseases, what a lovely, clean, crisp, quick way to go."

Well, I may have news for you, but not good news. Abuse never cancels use. And though we know groups and people ad infinitum who have made diet their gospel and their god, we are not excused, therefore, from obeying the New Testament admonitions to eat and drink to God's glory, and present our bodies to him as a living sacrifice. It is "... your reasonable service" according to Paul (Rom 12:1). And observe we said "according to Paul" – not James, though James would have agreed.

Furthermore, most who die of heart disease do NOT have a lovely, clean, crisp, quick exodus from life's responsibilities. Those who survive the paroxysm, and they are many, begin to walk a precarious treadmill wherein little is accomplished but the continuous engendering of fear and pain. (An exception is that minority who change lifestyle and may even go on to run marathons. For many it is too late for such a change and such a prospect.) Heart disease patients will experience profound exhaustion, and many other unpleasant symptoms, including irregular heart poundings. Bewilderment and depression will be their constant companions. In some cases, the simplest exertion, such as making trips to the bathroom, will cause shortness of breath and the humbling awareness of swollen ankles requiring support bandages. Appetites for food and sex die. Often, such a person wakes in the night to gasp for air and to engage in furious mental, squirrel-cage activities of anxiety and foreboding. Friend, we are not talking of rare events. One in every two Americans dies from diseased blood vessels.

Listen! It's the old story: "When all else fails, follow the directions." God has given us directions in his law and in his gospel. He has told us not to sunder apart what he has joined together. This is true about faith and works, justification and sanctification, the work of Christ and the Spirit, the objective and the subjective, body and mind.

For health, be in right relationship with God and man; learn to work and rest; to give out and to receive; and prayerfully seek to apply every clue to right living God has offered – including the principle "What therefore God hath joined together, let not man put asunder" (Mk 10:9). There is no absolute guarantee of avoiding sickness for anyone in this life, however obedient to divine law, but this we know: we weigh the scales on the right side when we seek to trust and obey. Then, and then only, can we rely on God for the outcome, be what it may, rejoicing in his will, for he alone does all things well. Notice that it is after his reference to sufferings, travail, groanings, and persecution, that Paul sings his sweetest song of rejoicing and praise (see Rom 8:18-39). Let us trust and obey as good stewards of the temple of God (our bodies, our selves), and ultimately we shall walk in the glory of an everlasting day which shall know no night, in life that knows no death, in joy that knows no pain – and forever!

SUMMARY

Life at its best is only possible when right relationships are preserved with God, our neighbor, and the material world.

Because life is simply a matter of doing one thing instead of another, continually, a sense of priority is essential. The Ten Commandments give us a splendid guide in this area suggesting the sequence of God, family, neighbors, things.

The Sermon on the Mount suggests that we will only do right if we are first right in character. In other words, what we are is of greater importance than what we do.

The human body viewed from the head down also suggests a list of priorities as regards health.

Man must never put asunder what God has joined together. This applies to work and rest, secular and sacred relationships, duties to God and man, sex and responsibility, food elements and their natural state.

It is not true that heart disease offers a clean, sudden exit from life's trauma.

When all else fails, follow God's directions. But if you are really smart, follow the directions to start with.

Those who understand the right relationship between the law and the gospel, the objective work of Christ and subjective work of the Spirit, have more than a head start towards the abundant life.

REFERENCES


4. "We physicians go to medical school, not health school. We devote most of our energies to the care of the sick, for which the costs are indeed staggering. We are not trained in health care. We are not reimbursed for health care. Very little money is actually spent on health care in this country." *New Eng J Med*, March 30, 1978, Vol. 298, No. 13, p. 747.

5. "How easy it is to forget that we are talking about a $160 billion-a-year industry, and that 90 to 95 per cent of these vast sums go for care, leaving only 5 to 10 per cent for prevention and biomedical research combined. The National Planning Association estimates that 92 per cent of 1976 federal health expenditures went to health care, 5 per cent to environment, 3 per cent to human biology and less than 1 per cent to life-style." *New Eng J Med*, March 30, 1978, Vol. 298, No. 13, p. 746.
SECTION II
CHASING METHUSELAH
"As the days of heaven upon earth"
(Dt 11:21)

CHAPTER 9
It's My Body and My Life!!! (Or is it?)

Here the question is answered, "Can't I do what I like with my own body?" The fact is we are not our own. On the bases of the gift of life, the preservation of life, and our redemption on Calvary, we belong to Another.

* * * *
... the Lord whose I am and whom I serve.
Acts 27:23

* * * *
And he died for all, that those who live might live no longer for themselves but for him who for their sake died...
2 Corinthians 5:15

* * * *
Why and Why Not?

Why burden others with unwanted warnings or restraint? Why urge upon free-willed beings any course that contrasts with their own desires and habits? Why shouldn't a man curse, fornicate, drink, smoke, and live only for his own pleasure? Why not? It's his life, isn't it? Why urge a son or daughter to be pure, to take God into account, to treat others not only as neighbors, but as brothers and sisters, fathers and mothers? It's their business, isn't it? Not yours or mine. As to choices affecting health, so what? It IS their life, isn't it?

It takes not only a great deal of pride to claim sole right to one's person, but also a colossal amount of either thoughtlessness or ignorance. For example, do not all of us take memory for granted, until some accident occurs which reveals to us how dependent we are upon this faculty for identity and survival? Ever parked your car at the airport of a huge city, gone away for a week, and returned to find you are not sure where you parked? Memory is a very ingenious contrivance containing detailed files reaching back to our infancy. Not only did we not invent this vital device, but we could not have done so given all eternity.

Must not the angels laugh at the arrogant strutting of human beings who have forgotten they could not manufacture even a faint resemblance of any of the body's 300 trillion cells? Did ever any king with as little reason claim sovereign rights over a territory as foolish mortals claim autonomy over themselves? How gentle is our God who could, if he wished, visit us with amnesia with embarrassing regularity. Men cannot even cure the common cold. Suppose in their endeavor to cure amnesia they even forgot what they were about, why they were so engaged and who it was that was striving so. One thing is certain, they would neither know much about, nor be able to do much with, the kingdom they belligerently assert to be theirs.

You Have Been Bought!
The answer from Scripture to man's claim of self-ownership is clear, unequivocal and final. "You are not your own. For you have been bought with a price: therefore glorify God in your body and in your spirit, which are God's" (1 Cor 6:19-20). Twice in these words the truth is told that we are God's, not our own.

How can it be? The text tells us. We were bought. We were delivered, if we will accept it. God's own Son valued us so highly that he would not leave us in the darkness of the shadow of condemnation and death. By his own agonies he saves us from ours, if we will let him.

But apart from that, did I conceive myself, bear myself, care for myself in the first days, months, years of life? Did I carefully contrive my own IQ, select my particular talents, ordain my race, color, country, and my parents and siblings? Let us go further. Can I guarantee a day of my life? Can I be certain of survival in the storm of fear, or enticement or anger? How much power do I have to pursue what seems to me good? How much power have I to even select what is truly good?

The old Book is right. We are not our own, either by origin, preservation, nature, privileges, or destiny. All that I can call my own are my mistakes, my sins, my failures, my innate abysmal selfishness, and poverty.

And if that is so, that all my "pluses" were given me, and that the outcome of every hour, if it is to be the best, must also be a "given," then is it so strange that I should behave as one not my own, as one who has responsibilities as well as privileges, duties as well as pleasures, obligations as well as indulgences? No, it is not strange. It is sanity. For "God is not mocked, for whatsoever a man soweth, that shall he also reap. For he that soweth to his flesh shall of the flesh reap corruption; but he that soweth to the Spirit shall of the Spirit reap life everlasting" (Gal 6:7, 8). That is no stem, loveless threat, but a merciful warning about the immutable nature of the universe.

And something else. Probably I (you) can be numbered among the privileged elite of earth. We are not among the half who live without enough food. We have shelter, and our environment is not shadowed by infectious diseases. Most of us have sight and hearing, and ability to move and do, to speak and sing. What shall I do with these advantages in view of the disadvantages of so many? Especially as I remember that there is no known reason why I am not among that many.
But how can I discharge my obligations to those less fortunate? One way only exists. Only "in Christ," by trust and obedience, can my way be wise, safe and useful. He will lead me in the paths of stewardship. My life is not my own, nor are my moments, talents, opportunities, or health. They are all held in trust. To rightly use them is the rent for the space I occupy down here.

**The Cross and Our Selfish Individualism**

When a man says that he has a right to do what he likes with his life, his body, his all, what he really means is that he doesn't want to get involved. He has no wish to leave a bequest to humanity as it has done to him. In other words, he wants to be a selfish pig, so there. But –

Each of us is a social product, nurtured by the whole family of man, loved by parents and grandparents, taught by teachers and clergy, protected by policemen and soldiers and judges, encouraged by universities, inspired by artists and poets. Each of us contains the cumulated investment of thousands of years, and is the product of a multitude of hopes. We have no right to squander this long-term inheritance...

Much more motivation exists than Evans Hill has listed. Stand under the shadow of that ancient cross and hear the plaintive cry, "My God, my God, why hast thou forsaken me?" The answer is: He was forsaken that we might forsake our habit of fleeing from life's cross, and the cross of the gospel, crosses which, if lifted, ultimately will lift us. For the cross of service and stewardship, when embraced, becomes as wings to a bird and as sails to a ship – the sighs of Calvary, through the magic alchemy of our loving, heavenly Father, ultimately become transfigured into the songs of Paradise.

Therefore sing it gladly: "We are not our own, for we have been bought with a price. Therefore will we glorify God in our body and in our spirit which are God's." Hallelujah!

**SUMMARY**

We belong to God, every cell, every talent, every capacity for thought, feeling, and action.

Life consists of responsibilities as well as privileges, duties as well as pleasures, obligations as well as indulgences.

The immutable nature of the universe is that of a cause-effect relationship. What we sow we reap inevitably.

We take many things for granted, including the many blessings of life, such as our senses and a marvelous mechanism of memory. Those who accept the sacrificial principle of the cross will find that instead of weight it will become wings.

**REFERENCE**

CHAPTER 10

England’s Food Scandal

Human depravity contributes to the poisoning of the masses by poor food and dangerous drugs. Intelligent Christians do well to be skeptical about the motives and practices of all corporate groups including the government, food processors, and pharmaceutical companies.

* * * *

Self-imposed risks and the environment are the principal or important underlying factors in each of the five major causes of death between age one and age seventy, and one can only conclude that, unless the environment is changed and the self-imposed risks are reduced, the death rates will not be significantly improved.

Marc Lalonde, A New Perspective on the Health of Canadians, p. 15.

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Beware of Men

When we forget the biblical doctrine of human depravity we tend to ascribe a considerable measure of reliability and honesty to leaders of government and industry. Not only do most people believe that all medical procedures have been thoroughly screened before being practiced on the public, but they also assume that large-scale status quos in matters affecting national health are under close scrutiny and adequate control. The truth is otherwise, and here again we have an example of the truth that what we don't know can hurt us, even kill us.

One only has to browse through medical journals to find that now, as in all other ages, there is "something rotten in the state of Denmark" and all other states as well. That health and survival are the fruitage of only constant vigilance becomes clear the more we read appraisals of current situations affecting the well-being of millions. We offer a few examples from well-known British publications of this decade with the warning that it would be folly to consider that the problems alluded to are limited to across the waters.

Examples of Food and Drug Scandals

A well-known book in Britain is entitled The Food Scandal, by Carolyn Walker and Geoffrey Cannon. According to the internationally known newspaper the Times, this book is "an important contribution towards improving the health of the nation." Another respected British paper, The Observer, observes this book is "a literate and authoritative guide to good health." The editor continues "we have lost touch with what is naturally good for us to such an extent that few of us remember what the boundless energy and optimism engendered by good health actually feels like." And the Sunday Times was more sweeping than these other observations when it wrote: "The food we eat in Britain and other western countries – red meat, cheese, butter, jam, milk and eggs – is the single major cause of the diseases we suffer and die from. These implications of the National Advisory Committee on Nutrition Education (NACNE) report are explained in "The Food Scandal..."*

The Opren Example

On January 29, 1983, The Lancet published an article called "Opren Scandal." This article was not primarily about diet but rather the use of unnecessary and unsafe drugs. The article reviewed two BBC programs devoted exclusively to the marketing, and then abrupt withdrawal, of the dangerous drug Opren. Said The Lancet:

The point which was made in these programs was that the defenses against widespread prescription of a dangerous drug are the responsibility of doctors, and that these defenses were inadequate in the face of a carefully organized marketing onslaught.

... The campaign took several forms. Key figures were extravagantly entertained at sponsored conferences and attractive venues. Dubious clinical and experimental observations and hypotheses were propagated in a way calculated to lend an air of scientific respectability, carefully fostered by the control of funds given to clinical departments for research... At the same time a publicity campaign was launched through newspapers and television to encourage patients to press their doctors for treatment with the new drug...

The claim by one rheumatologist that we were witnessing the workings of a free-market economy in which the best drug survives, lacked persuasiveness and echoed uncomfortably an earlier statement that there was no essential difference between the marketing of soap and that of medicines... Although physicians asserted their information was largely derived from independent sources while advertisements had only a trivial influence, when their factual knowledge was objectively assessed the opposite conclusion was reached. It seemed that doctors were either unwilling to admit to the powerful influence of commercial pressures or unconscious of it. There is a further even more sinister corollary. As drugs are used more extensively after the initial launch, and further information suggests the benefits may be less and risks higher, this information tends to be restricted to scientific publications and small print prescribing information.¹

Example of Opposition to Dietary Report

The following is a later comment from the same medical journal, (1983):

It is difficult to find disagreement with the need for healthier eating habits in the United Kingdom... [yet] there is resistance in government, in the food industry, and in the health professions to developing effective dietary goals for the UK. The report of the National Advisory Committee on nutrition education probably took three years to prepare
and is the first statement of practical dietary goals from the government brought in the UK for forty years. That it is being made available only as a discussion paper is a measure of the resistance.4

Explanation of the opposition hinted at by The Lancet is given on a later page:

The agricultural and food industries are the largest single sectors of the USA and UK economies; their concern with the implementation of goals is therefore understandable. The industry's effectiveness in lobbying against goals should not be underestimated. Much of their opposition is centered on the imputed difficulty of quantifying goals. The industries prefer vague statements which cannot be interpreted to show the degree of change necessary by industry or consumers.3

Next comes The Lancet's suggestions for implementing recommendation of the NACNE Committee. We read:

Controlling the diseases of affluence — coronary heart disease, cerebrovascular disease, bowel cancer, dental caries, obesity, diabetes—requires more than treatment of disorders already clinically apparent. A preventive strategy, improving the pattern of food intake, is not only essential, it is also feasible and effective. Changes in diet and life-style have reduced the mortality rate from coronary heart disease in many developed countries over the past 15 years — by 25 percent in the USA and Australia...

The NACNE working party recognized that coping with degenerative diseases demanded a new approach to nutrition. Disorders with a dietary basis today are "chronic diseases which develop from an excess intake or an inappropriate ratio of some nutrients..." For the first time in the UK, the working party proposes specific targets for reducing intakes of those components in the nation's diet implicated in disease — fat, sugar, and salt. Intake of dietary fiber should increase through eating more bread, potatoes, fresh fruit, and vegetables.4

All The Lancet comments recognize the scandalous scheming of both government and profit-making organizations as responsible for huge numbers of unnecessary deaths. The drug industry, the food industry, and even members of the health professions are pointed out as resisting vital changes at the cost of human suffering. As alluded to by The Lancet, effective but unscrupulous lobbying in England has delayed certain reforms which in the USA and Australia have reduced the death toll by millions. How should Christians react to these harsh facts of life? Is it not our privilege and duty to cease to let others do both our thinking and our deciding for us in such a vital matter as health?

The Christian Philosophy of Health

Christians are temples of the living God. They should recognize even more than all others that the finest of all fine arts is learning how to live. For unbelievers who consider that the end of all things is zero, it is understandable that they give an equal rating of zero to all things along the way. But the Christian sees an infinite significance, not only at the end of life, but at every step along the pilgrim path. Life is not casual, it is causal. Decisions constitute sowing; and the reaping is inevitable and multiple, even if delayed. Reaping is always of the same quality as the sowing. Solemn thoughts indeed for every follower of the Master.

For centuries, professed Christendom labored under the delusion that the body was but a sack of dung, containing that hidden pearl, the soul. Therefore, it did not matter what happened to the sack as long as the soul was preserved. We all know better than that now — psychosomatic medicine has taught us that body and soul are as intermixed as the white and yellow of an egg in the final omelet. Whatever effects the physical also affects the mental and spiritual operations of human beings. When Paul prayed in 1 Thessalonians 5:23 that God might sanctify us wholly in body, spirit and soul, he was not trying to give a precise delineation of the components of a human person, but rather affirming the necessity, in the language of the day, that the whole of our nature be subjected to the influences of the Spirit — that Spirit whose primary tool is truth.

Sowing and Reaping

In Christ's Parable of the Sower he spoke about the different yields brought forth by the same seed. Some seed brought forth thirtyfold, some sixtyfold, and some a hundredfold. Let's apply this parable to our daily living. One of the reasons for the great diversity of fruitfulness is undoubtedly the fact that many of our most important decisions are made as a result of traditions and customs — sometimes cunningly strengthened and perpetuated by profit-making groups — rather than thoughtful meditation after research into the facts of the case. The way most of us spend our recreational hours, the way we dress, the way we eat, and a thousand other human habits, suffer from this almost universal weakness of following tradition. But true sanctification is a conscientious review of every habit and practice in order that we might be the most efficient for our Lord.

I, for one, confess with shame that there are so many lacunae in my own life-style. I would it were not so. I confess also that I am very slow to learn, and that I continually make the same mistake — not twice or three times — but many times. Changing one's habits is an agonizing business. Nevertheless, it is the wisest thing to do.

It was not until the 1930s that research in psychosomatic medicine began turning the tide of human thought regarding the relationship between body and mind. Now in the eighties nutrition has come to the forefront. A new concept takes a generation to make its way in human affairs, and those regarding psychosomatic medicine, and dietary reform, are no exceptions. How tragic it is that often the sects have been the first to take advantage of new truth, and even sadder that that truth is sometimes taken to an extreme, bringing dishonor rather than glory to God. But abuse never cancels use, and no Christian is discharged from the duty of reviewing life habits and bringing them into harmony with the best of modern knowledge. Such knowledge is derived from both research in the natural and physical realms and in divine revelation. To wait for government fiat and mandatory national reform before making the vital decisions which affect our health would be folly.

Moderation Needed

This decade, more than any in human history, has thrown a flood of light on what could be called a sane and healthy life-style. If some readers are like me, they will find that ideals, like the stars, are ever beyond reach, yet ever faithful in pointing the true direction. There is courage in the thought that, in our battles with ingrained habits, all real progress in character building and
life-style is like the incoming tide – progress on the whole. In a world where there are a thousand complexities, it is our habits that make or break us, not the occasional deviations from the ideal. There is no need for a strained, overanxious scrupulosity on the part of Christians. But there is need for careful study and resolute prayerful effort.

May we emphasize again that the revelations of recent research do not endorse a narrow, rigid life-style hemmed in by precise, unbending rules and regulations. The human body is so wonderfully made that it can adapt to many diverse situations. We can live with one lung or one kidney, one eye or one ear, etc. One of the 500 or so functions of the human liver is that of detoxifying poisons that enter the body from a variety of sources. There are many defense systems within the human organism functioning at various levels, commencing with the unbroken skin and climaxing in the work of defensive white blood cells, hormones, vitamins, and the like. Any life wholly given over to the preservation of health would be a poor life.

Health is that which we must have to do that which we wish to do. Health is the trunk of life. Just as leaves and branches are dependent upon the trunk, so all other activities are dependent on health. No one would want a forest of trees that were only trunks.

If men and women would only give as much time to the study of how to care for their bodies and minds as they now do to watching television's cosmeticized junk products – or other careless, fruitless pursuits – results would be not only rewarding but marvelous. "Beloved, I wish above all things that thou mayest prosper and be in health, even as thy soul prospereth" (3 Jn 1:2).

Happiness and health are so closely intertwined that only the subtleties of the adversary's mastermind could have induced humanity to be so careless about such a relationship. But a Christian who is healthy and happy in a heavenly way because of the gospel also wants to be healthy and happy in daily living for Christ. For a healthy believer, the Christian pilgrimage is not only the greatest adventure of all time but the happiest as we all. But the joy of the journey must never diminish vigilance and skepticism as to the destructive devices of vanity fair. Remember that most of those attending that fair have long been traveling in a direction away from the heavenly city. Many of their traditions and devices had their origin in another place, one long associated with darkness, deception, devils, and death.

SUMMARY
Human corruption and greed result in our being surrounded by concerted efforts to "spend money for that which is not bread." Poor dietary practices are largely the result of the advertising and manufacturing devices of food and drug profiteers.

The fact that we sin in ignorance does nothing to delay or prevent our reaping a harvest of pain. Christians, as temples of the living God, need to read and become intelligent on health issues which vitally affect us for time and eternity.

REFERENCES
CHAPTER 11
Taking the "Die" Out of Diet (Part One)

The major factor involved in most chronic diseases is what we put between our lips, particularly diet. In the last decade or so, over forty international committees have endorsed a dietetic program that is chiefly vegetarian. In a nutshell, these committees recommend that we increase our consumption of whole grains, vegetables, and fruit, but decrease our consumption of foods high in fat, sugar, and salt.

* * * *

If there is one nutrient that has the decks stacked against it, it's fat. The typical American diet not only is rich in protein, but it also has a higher fat content than nearly any other diet in the world.


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Seventy percent of the sugar in today's American diet is "hidden" in processed foods. Check the labels of the packaged soups, cereals, salad dressings, soft drinks, ketchup, sauces, peanut butter, dessert mixes, and what-have-you in your pantry and see how many list sugar (or corn syrup) as a main ingredient.

Ibid., p. 32.

* * * *

Vitamin lack as related to emotional illness is indisputable.

Benjamin A. Kogan, M.D., Dr. P.H., Health, p. 298.

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"Eat Ye That Which is Good"

We have already introduced the subject of diet, but its importance is so great as to demand extended treatment, and even some repetition.

The Surgeon General of the United States in his 1979 report to the American people admonished, "You, the individual, can do more for your own health and well-being than any doctor, any hospital, any drug, any exotic medical advice." The evidence is overwhelming that he is right. Esteemed medical authorities the world around are giving the same counsel. As mentioned earlier, doctors now tell us that all that they can do as a result of their years of training and experience – with the aid of the modern pharmacopoeia, well-equipped hospitals, and the best of medical technology – is contribute about 10 percent to our overall health and well-being. The same specialists inform us that what we eat is of primary importance.

In the beginning of time, God prescribed an ideal diet for our first parents. It consisted of fruits, grains, nuts – in essence what we call a vegetarian diet. The Bible nowhere demands that we be vegetarians, but it does indicate that the nearer we come to the Edenic diet the better will be our health. For the first time in history, scientific evidence in support of the Edenic diet is now so complete that over forty international committees in the last decade or so have endorsed a dietetic program that is chiefly vegetarian.

It is an old but true platitude, that we are what we eat, (and, after all, who really wants to be a chocolate eclair?) and another says, what we eat and drink today walks and talks tomorrow. It is true, as mentioned earlier, that D-E-A-T-H is mainly E-A-T.

In no instance except that of the way of salvation does man's ignorance cost him more dearly than his dietetic ignorance. In the industrialized world, the vast majority of people are digging their graves with their knives and forks. Most people in civilized lands are more particular about what they feed to prized animals and what they put in the engines of their automobiles, than what they put inside their own bodies – God's temples. As Scripture predicts, they reap destruction.

In 1977 the government select committee on Nutrition and Human Needs, known as the McGovern Committee, held extensive hearings and issued its famous Dietary Goals for the United States. The counsel given by the committee amounted to this:

1) Increase consumption of whole grains, vegetables and fruits.
2) Increase consumption of fish and poultry.
3) Decrease consumption of red and fatty meat.
4) Decrease consumption of foods high in fat, and partially substitute poly-unsaturated fat.
5) Decrease consumption of butter, eggs, and other high cholesterol foods; substitute non-fat milk for whole milk.
6) Decrease consumption of sugar and sugary foods.
7) Decrease consumption of salt and salty foods.

We do not regard this as an ideal diet, but it is a wonderful step in the right direction. It has been estimated that if the majority of Americans followed these counsels, it would reduce the nation's health bill by $100 million. Of far greater importance would be the reduced human suffering and the increased productivity. As predicted by Senator McGovern, it has already reduced the toll of atherosclerotic disease by 25 percent.

The great fact that stands out, as we contemplate the diet question, is that while we have conquered the infectious diseases of other centuries, the majority of deaths today are premature. Our diseases are degenerative diseases: heart disease,
atherosclerosis, cerebrovascular disease (stroke), diabetes, arterial hypertension, cirrhosis of the liver, and gout, etc. The other major killer, of course, is cancer and here again the evidence is overwhelming that what we put between our lips is the major cause of death, not only in the case of lung cancer, but in many other instances also. Drs. George Mann and Frederick Stare of the Harvard School of Public Health have summarized the matter: “In our opinion, nutrition is the most important single environmental factor affecting health.”

The Testimony of Specialists

Such pronouncements only confirm the verdict given by famous specialists of earlier years. We append a few of them. Dr. Mikkel Hindhede: “The two chief causes of disease are food and drink.” Dr. Harvey W. Wiley: “I believe I would not be far out of the way to say that diet may be said to be a factor in every disease to which man is heir.” Dr. Osler: “Ninety per cent of all conditions outside of acute infections, contagious diseases, and traumatisms, are directly traceable to diet.” Sir Arbuthnot Lane: “The food question is infinitely the most important problem of the present day, ... and if properly dealt with must result in the disappearance of the vast bulk of the disease, misery, and death.” Dr. J. H. Kellogg: “At least nine-tenths of all chronic maladies with which doctors are called upon to deal might be successfully treated without the use of drugs by a physician well acquainted with the varied resources afforded by the science of nutrition.” Sir Robert McCarrison:

I found ... that no organ or tissue of the body escapes the effects of faulty food deficient in vitamins or in other elements and complexes necessary for normal nutrition; and that animals fed on such faulty food are prone to be invaded by microbes of all kinds ... Properly fed animals remain remarkably free from disease, while improperly fed animals are remarkably subject to it. Do these discoveries apply equally to human beings? The answer is undoubtedly in the affirmative ... Of all the medicines created out of the earth, food is the chief.2

Conclusive evidence of the importance of diet is found in the fact that in countries of the Third World people who escape infectious diseases only rarely develop the degenerative diseases so common to people of their age in Western lands. The research of Drs. Painter, Trowell, and Burkitt is conclusive in this area.5

Today, diseases that were hardly known in all previous centuries have appeared in a cluster in all civilized countries. While some other diseases such as cancer have been known for millenniums, never before have they been so widespread and so decimating. At the turn of the century, one person in twenty-nine died of cancer. Now it is one in five. (Life extension and increase of tobacco use have much to do with these figures, but probably not everything.) Diabetes is escalating at a fearful rate. So is cirrhosis of the liver. Despite the fact that the toll in heart disease and strokes has decreased in the last fifteen years, the two together still take as many lives as all the other causes of deaths combined. More than a thousand people a day die of heart attacks, and seven hundred and fifty people per day die of strokes. While animals are capable of developing arterial diseases, it is only among mankind that the problem is so rampant. Never before in all of history has the incidence of cancer been such a proportion of obese people on the face of the earth. Obesity, as we all know, is linked with many other potential hazards. Ask yourself why you’ve never seen a fat squirrel, and why it is that animals left to gather food for themselves are not usually obese? Typically what looks like “flab” is muscle. Not to remember and understand history is to be condemned to repeat it. All of us stand to profit by an understanding of the health history of this country, this century.

The Beginnings of the Health Revolution

The revolution began in the first decade. It was in 1905 that a mountain of a man, by the name of Dr. Harry Washington Wiley, Chief Chemist of the U.S. Department of Agriculture, provided the ammunition for President Theodore Roosevelt to deliver the American consumer from the plague of adulterated foods, mislabeled medicines, tainted meats, and fraudulent packaging. He decided upon a controlled, scientific test, and in November 1902, requested a dozen employees of his department to help him. The volunteers followed a rigid regimen eating only the doctored foods that Wiley served them in the basement of the Chemistry Bureau. A daily record of weight, pulse, and temperature was kept by each member of the team, plus the carrying about of containers to collect urine and feces. The fire of publicity was kindled. The editor of the Ladies Home Journal “stoked the fire into a fire alarm, a full-fledged conflagration.” He wrote in the May issue of the magazine:

A mother, who would hold up her hands in holy horror at the thought of her child drinking a glass of beer, which contains from two to five percent of alcohol, gives that child with her own hands a taste of medicine that contains seventeen to forty-four percent of alcohol — to say nothing of opium and cocaine.

And later it was discovered that Mrs. Winslow’s Soothing Syrup, (a medicine many American mothers used to quiet teething babies) in England had the word “poison” in big, black letters on the label, as required by the British government.

Then a literary man got in on the issue. Upton Sinclair told horrified America that conditions in Chicago’s meat-packing plants were nauseating. He wrote:

The rats are nuisances and the packers would put poison bread out for them; they would die, and then rats, bread, and meat would go into the hoppers together to merge as breakfast table’s sausage. Graft was so rampant that it was possible for packers to receive two thousand dollars weekly in bribes to turn hogs, who died from cholera, into fancy grade lard.4

Although Sinclair’s book was one of fiction, it reflected in essence the truth about hygiene in meat-packing plants. The President read the book in manuscript form and prepared for action.

In the May 1906 issue of World’s Work, came three damning articles more sensational than Sinclair’s book. One of these articles told of meat processing rooms where, "doors, rafters, and floors are covered with blood, grease, and awful filth." A second article revealed that the tuberculosis rate among packing house employees was 55 percent higher than in the city as a whole. It was pointed out also that the creek which was a sewer for the residues from the stockyards nearby was so rank that "in the summer, if you are detained on the bridge that spans it, your clothing will smell for hours."
Out of the fear came the Pure Food & Drug Act. The nation, ever since, has been fighting to enforce its standards. Is the situation any better today? Yes, a hundred times better, in many respects. Worse? Yes, a hundred times worse, in other respects.

According to the World Health Organization, today we confront "the greatest epidemic mankind has ever faced." This is a reference not to AIDS but to the more than a million people in the U.S. (and proportionate statistics in other Western countries) who die of degenerative diseases each year. The tragedy is not just a result of the fact that we have a higher proportion of older people than in earlier decades. The heart disease shown by autopsies to be present in young American men in their twenties is rarely found in young men of Korea or Japan. In other words, it is the countries that live on animal products and refined foods that suffer chiefly from degenerative diseases. This confirms the findings of Burkitt and his fellow workers.

Stories Illustrating Human Folly as the Chief Cause of Disease

Let us return to history. We draw the following stories from Alfred McCann's classic work, The Science of Eating. To learn the lessons of these stories may be worth more than a million dollars to you. These lessons can add years to your life and life to your years.

The Madeira-Mamore Railway Company was constructing a 232-mile-long railroad connecting Bolivia with Brazil in 1914. Four thousand men were literally starved to death on a white bread diet. Food prices were so shockingly high that the workmen could not afford much else besides white bread, hard white crackers and tapioca, which is also highly refined. Other items of diet were lard, coffee, sugar, macaroni (also refined and dead), and xarque, which is dried beef. A little white rice was available. Luxuries were sold at exorbitant prices, far beyond the means of the men – canned pork and beans, a poor canned spinach, sausages, jam, com-flakes, oatmeal and condensed milk. The oatmeal was only available to officers.

Alarming symptoms began to appear. The first one was a tendency to stub the toe while walking along smooth roads. Then a slight swelling appeared in the ankles. This gradually extended to the knees, with loss of sensation. At its height, the swollen limb could be prodded with a finger, and the dent would remain for some time. The next symptoms were shortness of breath and palpitation of the heart, with tremor of the nerves. Walking was characterised by halting, hesitating, uncontrolled strides. As the cases advanced, the swelling subsided, and eventually prior to death nothing remained apparently but the bone and skin.

It is a curious but tragic fact that thousands of healthy monkeys played around the camp where human beings were dying like flies. The fruits and nuts they lived on were available, but had been dubbed as mere "monkey food" and spurned. The men rejected what would have saved them.

Another fascinating story tells of the Kronprinz Wilhelm. This German battleship cruised the high seas, pirating French and English merchant ships during the First World War. This cruiser was at sea for eight months without taking on any quantity of fresh fruit or vegetables. There was plenty to feast on, but it was the quality of the food, not the quantity, that caused the problems. They had all the fresh meat, fat (margarine), cheese, boiled potatoes, canned vegetables, condensed milk, sugar, fancy cakes, biscuits and white bread they could eat, plus all the coffee and tea they could drink. Many ships were plundered in that eight months and they had enough food to last for years at sea. However, they sent such things as whole wheat down to the bottom of the sea.

As with the last story, alarming conditions began to develop. Typical symptoms of paralysis appeared. Other symptoms were dilated heart, atrophy of muscles, pain on pressure over nerves and anaemia. By March, 1915, one month before they sailed into a neutral American harbour for help, 50 men could not stand on their feet. Sailors were dropping at a rate of two a day. It seemed that a curse had descended on the cruiser, and it was plain that the whole crew was rapidly going to pieces.

The reason why most people do not end up the same way is that they usually have some fruit and fresh vegetables which offset the most serious results. However, it is very interesting that the majority of Western people eat similar food to that described above.

One hundred and ten people had been stricken with beri-beri. The officers showed some symptoms, but these were not as serious as those of the rest of the crew. This was because whenever fruit was taken on, it was given to the officers.

The formula given to the men as treatment, after the ship pulled into an American port for help, is also interesting.

"To 100 lb of wheat bran add 200 lb water. Leach for 12 hrs. at 120°F. Drain off liquid. Give each man 8 oz each morning.

"Give each man 1 teaspoon wheat bran, morning and night, until contra-indicated by loose stools.

"Boil cabbage, carrots, parsnips, onions, spinach, turnips together 2 hrs. Drain off liquid. Discard residue. Feed liquid as soup in generous quantities with unbuttered whole wheat bread.

"Wash and peel potatoes, Discard potatoes. Retain skins. Boil skins and give liquid to men to drink 4 oz per day.

"Give to each man yolks of four eggs a day in fresh, sweet, unskimmed milk, one yolk every 3 hrs., with as much milk as he will drink by sipping.

"By noon, with dry, whole wheat bread, give 1 oz fresh roast beef, for the psychological effect upon the men, who have been taught to believe that without meat they cannot live.

"One hour before drinking milk give juice of ripe oranges or lemon juice diluted with water, without sugar, to each man.

"Keep apples or apple sauce within reach of men all the time.
"At end of first week let the men eat solids of vegetable soup as well as liquid.
"Men must avoid all cheese, whites of eggs, lard, fat of any kind, white bread, crackers, pastry, puddings, mashed potatoes, sugar, saccharine, salt meat, fish, polished rice, pearled barley, degermininated corn meal and gravy."

On such a regimen there was improvement from the second day, and by the fourth or fifth day men were leaving the ship's hospital. By the 10th day, 47 men were cured.

This experience showed very graphically the folly of living on such a diet – not just because of the beri-beri. Before that extreme condition was apparent, the men had been showing signs of very poor resistance to such things as pneumonia, pleurisy, rheumatism, etc. They had superficial cuts which refused to heal, haemorrhages, bones which refused to mend, etc. These stories show that while food-reform is not the only factor in good health, it is a vital factor.5

McCann, of course, did not understand about vitamins as we do, nor of the dangers of cholesterol, but his major point about the dangers of refined foods is as relevant now as then and then as now.

There is probably no field of human thought in which sentiment and prejudice take the place of sound judgment and logical thinking so completely as in dietetics. Millions die yearly because of ignorance and folly. It need not be so for you.

The Experts Now Agree

This opinion has been echoed internationally:

Between 1968 and 1978 twenty expert committee reports on heart disease prevention or, more generally on dietary goals, had been published, from the USA, Canada, Germany, Holland, Norway, Sweden, Finland, Australia, New Zealand and, indeed, Britain. All accepted that heart disease is diet-related. All proposed changes in diet. Almost all proposed targets. Most recommended a cut in fats consumption (16) and sugars consumption (14) for the general population. None had any enthusiasm for saturated fats or sugars.

Between 1978 and 1982 the pace quickened, and another 17 expert reports were published; after 1979, all recommended a cut in salt consumption for the general population.

The modern view on food and health is well summarized by Sir Richard Doll, a doctor of great distinction who has been Regius Professor of Medicine at Oxford University and director of research of the Imperial Cancer Research Fund, and who was jointly responsible for establishing the causal link between smoking and cancer. In October 1982, while Dr. James was revising his document, Sir Richard stated in his Harveian Oration, a key speech given by and to leaders of the medical profession:

Whether the object is to avoid cancer, coronary heart disease, hypertension, diabetes, diverticular disease, duodenal ulcer, or constipation, there is a broad agreement among research workers that the type of diet that is least likely to cause disease is one that provides a high proportion of calories in whole grain cereals, vegetables and fruit; provides most of its animal protein in fish and poultry; limits the intake of fats ... includes very few dairy products, eggs, and little refined sugar.6

In early 1983 The Lancet, the doctors' journal, had started a series of features under the general title 'Nutrition: the Changing Scene.' The medical profession has officially regarded nutrition – the study of food and health from a scientific or medical point of view – as a backwater, for the past fifty years. The Lancet features marked an irreversible and profound shift of British medicine, to a new recognition that good food is vital to good health.7

SUMMARY

The individual can do more for his own health than any doctor, hospital, drug, or medical advice.

The Bible does not demand that we be vegetarians, but it does indicate that the nearer we approach that ideal the healthier we will be.

For the first time in history, the main questions regarding nutrition have been resolved.

The most significant nutritional insight this century is the fact that it is the excessive use of animal products which is responsible for the majority of premature deaths.

The most expensive medical experiment of all time proved conclusively that excessive cholesterol and saturated fats are the main causes of early deaths.

The millions of dollars spent on cancer research have brought no real cure for the main cancers. Cancer is on the increase. This is true also of diabetes, cirhosis of the liver and other maladies.

Never before in all of history has there been such a proportion of obese people on the face of the earth.

There's no field of human thought in which sentiment and prejudice so completely take the place of sound judgment and logical thinking as in food habits.

REFERENCES

CHAPTER 11
Taking the "DIE" Out Of "Diet" (Part Two)

Millions in the Western world while eating an abundance of food are actually dying of malnutrition. This is because their diet consists largely of refined products lacking in the full range of vitamins and minerals present only in unprocessed foods.

* * * *

The problem is clear, the evidence incontrovertible: – The incidence of some human cancer is rising. Cancer is killing one in five Americans. And the economic costs of cancer are a minimum of $15 billion a year.


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In the U.S. alone, 405,000 people will die of cancer and nearly a million new cases will be diagnosed this year. Nearly every family is affected; one out of every four Americans will eventually be stricken with the baffling disease.


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It's Not Complicated

A down-to-earth food manual prepared in Great Britain on the verge of World War II, by nutritionist Violet Plimmer, sums up the practical truths of dietetics:

The materials required by the body for its structure and upkeep are very simple: air to breathe, water to drink, and proper food to eat. That is all. Drugs are not a necessity. Yet fortunes are made by the sale of patent medicines to those who have no money to waste and could more profitably spend it on proper food. Advertisements announce the variety of drugs obtainable in unlimited amounts without medical prescription. The headache, constipation, anaemia, dyspepsia, nervous debility, wasting, obesity, lung weakness and kidney trouble which patent medicines claim to relieve are all signs of malnutrition. Long continued errors of diet put the human mechanism out of order and drugs are taken in the vain hope that they may remedy past, present and future shortcomings or excesses of food.

To avoid such mistakes, the facts we need to know are:

- The various indispensable kinds of food material.
- The relative proportions in which these different kinds of materials should be eaten.
- The total quantity of food required.¹

First, a few general remarks on the subject of diet. Our first parents were not biochemists. It's not necessary to get a master's degree in nutrition before we can understand how we should feed ourselves and our family. Common sense can be a great guide here. As already noticed in the last quotation, the great cause of disease is the partaking of food as God did not make it. The refining of foods is responsible for about 80 percent of degenerative diseases, because man has separated what God joined together in the natural realm of food.

We are surrounded by literally thousands of varieties of foods in nature including vegetables, grains, fruits, nuts. Any person who lives a normal life, including adequate physical activity and who partakes of a variety of natural food stuffs, cannot but ingest all the approximately fifty known, indispensable elements needed for nutrition and in the right proportions and in the right amount.

When man refines foods, at that point he sets up an imbalance of correct nutritional proportions and relationships, an imbalance that leads ultimately to obesity, malnutrition, and disease. Only in the compounds that God has made are minerals and vitamins, etc., in correct relationship. When we purchase pills or tablets, we do not have that correct pattern of food elements and become responsible for an imbalance. Many examples could be given. The taking into the body of too much protein hinders the absorption of calcium and paves the way for osteoporosis. Large amounts of phosphorous have a similar result. Certain trace elements operate magnificently in the human system when taken in normal amounts in natural foods, but when taken excessively in capsules, they can have severe and dangerous results. This principle of "what therefore God hath joined together, let not man put asunder" cannot be stressed too much. For example, cyanide is found in literally thousands of foods, but in the combination in which it is found in nature, it does no damage. Abstract that cyanide and it can kill a person in seconds. Excessive zinc taken in tablets can interfere with the body's use of copper, and excessive vitamin C does the same with B12.

Supermarket Dangers

The vast majority of foods that are bought in packages are gastronomical monstrosities. They are usually excessively laden with salt, sugar, and fat – the very causes of our degenerative diseases. Packaged and canned foods have hundreds of times the amount of sodium found in the natural product. Examples are canned peas and beans, and the grains used in packaged cereals. When we remember that high blood pressure is the cause of more deaths than any other factor, our preservation of a normal pressure is seen to be essential. But this is impossible if we ingest large amounts of packaged and canned foods. The inhabitants of Third World countries, who live on simple diets, have a stable low blood pressure which almost never rises. Such people are free of the degenerative diseases that plague more prosperous countries. Indeed, it must be stressed that degenerative diseases are the diseases of affluence. It is only in prosperous countries that we find them to a marked degree.
Another example of human folly is found in manufactured candies. These are excessively laden with sugar in one form or another (without the mineral and vitamin elements found with sugar in its normal state). Therefore, the person who eats largely of candy paves the way for hypoglycemia, diabetes, and an early death. The same is true regarding the consumption of pastries, cookies and rich cakes, though the chief villain here is saturated fats. Yet another factor that should be emphasized is the fact that heat destroys some of the most important food elements. This does not mean that no cooked food should be used, for nature has a generous latitude in her provisions for health and nutrition. But it does mean that the person who mainly subsists upon prepared foods is inviting deficiencies of those elements which are destroyed by heat, such as vitamin C. (In some cases nutrition is probably increased by cooking where the foods taken raw are not easily digested.)

Keep in mind that today we are plagued with diseases hardly known before this century. Massive coronary heart disease, diabetes, prostate troubles, etc. were not the plagues of earlier generations. They have come only with the processing of food. Towards the end of the nineteenth century white flour became a universal product because of the newly invented mills. Long-suffering nature endures ignorant abuse for decades before it makes its protest. But by the 1920s, that protest had begun to be heard and has been mounting ever since. Processed foods not only have wrong proportions of food elements, but they have hundreds of chemical additives as well, many of which constitute risk factors.

It is not essential to become a vegetarian. One should be aware, however, that the nearer one comes to a vegetarian diet the better one's health is likely to be. It is true that there are some people whose digestion has been so abused they can no longer tolerate whole grains and some other natural foods. But for the vast majority of people a gradual transition towards a diet that is mainly vegetarian would bring inestimable health benefits. In Third World countries grains are the staple food. This is as God intended, for only carbohydrates are unattended with dangers when consumed in large amounts. Bread has always been a favorite food of nations, but today's bread is a broken staff of life. American bread, in general, is the worst in the world, and many people have become allergic to the gluten in wheat.

**The Whiter the Bread – the Sooner You're Dead**

In ancient times wheat was ground between millstones that crushed the grain but did not remove any of it. In effect people were eating whole wheat bread. Beginning in the late nineteenth century and becoming almost universal in the twentieth, bran was discarded because it was considered to be an irritant to the digestive system. Nowadays the germ is also removed, and it is the germ that contains the high percentage of the protein, natural sugars, wheat oil, and most of the vitamins and minerals. Thus, milling removes nearly all the valuable nutrients of the natural grain. We feed what we take from the wheat to animals, and they thrive upon it while we develop deficiency diseases. The American horse and other farm animals have a better diet in general than the American people.

White flour does not attract insects as much as whole grain flour. By the time it is dusted with chemicals, it is actually a dangerous product. The unnatural substances used for the purpose of preservation, and bleaching contribute towards the ills of the eater. Before bread is made, other additives are usually introduced including softeners and emulsifiers. All of these are refined products which have their own dangers. In recent years chemicals used in connection with breadmaking include methylbromide, nitrogen trichloride, chlorine dioxide, calcium stearyl fumarate, polyoxyethylene monostearate, stearyl-tritrite, mono diglycerides, etc. Added to these are the mold inhibitors such as calcium propionate and sodium propionate.

Those people who complained in the nineteenth century about refined flour — reformers such as Sylvester Graham — were considered eccentrics. Right up to World War II, it was considered faddish to prefer whole-meal bread. The discovery of vitamins and trace minerals this century began the change, and ultimately both Britain and the United States made it mandatory to enrich flour. The term enrichment, of course, is only a joke. Milling removes 40 percent of the chromium, 50 percent of the pantothenic acid, 30 percent of the choline, 86 percent of the manganese, 16 percent of the selenium, 78 percent of the zinc, 76 percent of the iron, 89 percent of the cobalt, 60 percent of the calcium, 78 percent of the sodium, 77 percent of the potassium, 85 percent of the magnesium, 71 percent of the phosphorous, 77 percent of the vitamin B-1, 67 percent of the folic acid, most of the vitamin A, 80 percent of the vitamin B-2, 81 percent of the vitamin B-6, 72 percent of the vitamin B-6, most of the vitamin D and 86 percent of the vitamin E. All that is replaced is minute amounts of vitamin B-1 and B-2, B-3 and iron. The iron that is added, the body finds difficult to absorb.

How important are these food elements that are removed? Today we know that heart attack and diabetes victims are usually deficient in chromium. When experimental animals are deprived of chromium, their blood vessels become thick with fatty deposits much like those that lead to heart attacks in human beings. Experimental animals deprived of manganese become sterile. Chickens and rats deprived of selenium develop liver disease. Deficiency of zinc can produce dwarfs. Cobalt is essential for the maturing of the red blood cells that carry the iron which in turn convey the life-bearing oxygen for every warm-blooded animal and man. Without calcium, bone and tooth formation is hindered. Without sufficient sodium, body cells begin to dry up or swell. Magnesium is essential for the activating of exchange of energy within cells, and phosphorous mediates energy exchanges throughout the body. The chemicals now so famous for the normal manufacture of DNA and RNA for the genetic code are dependent on an adequate supply of the B vitamins and folic acid. Folic acid is essential for production of steroid hormones within the body and choline is required for sound cell walls. Without vitamin A, vision begins to deteriorate and skin problems develop. The mucous membranes of the eyes, mouth, and tongue are dependent upon vitamin B-2, and vitamin B-3 is a safeguard against pellagra. As for vitamin B-6, many researchers today believe that the propensity of arterial walls to develop plaque is in part the result of a lack of vitamin B-6. It is vital in many other areas of body function. Vitamin D makes possible the utilizing of calcium by the body to strengthen bones. Vitamin C, which is very widespread in nature, has a multiplicity of functions including the retaining of structural integrity in cell membranes.

These, then, are the essential nutritional elements that are missing to some degree in white flour. When they are removed, the correct ratio and balance of nutrition in the grain is destroyed and we call the result enrichment. A tragic joke indeed!

What happens to wheat also happens to rice. For decades rice has been polished, refined, and at times linked with asbestos particles which are so dangerous to man. Sugar is another deadly product of refinement, and so are bottled oils.
Take a stroll through the supermarket one day and read the labels. Nearly all the convenience foods are preserved by a sea of potentially harmful chemicals as well as being laced with salt, sugar, and fat, the twentieth-century killers. Today we have millions of people leaping on the ecology bandwagon and rightly so. But the pollution of the food we eat is a far greater danger than most of the environmental pollutions. This one principle from God's word applied, that "what therefore God hath joined together let not man put asunder," could save millions from an untimely death as well as pain and sorrow beforehand.

The Importance of Food Fiber

The magazine, Food Technology, published last decade an article on fiber by James Scala, who is Director of Nutrition at Thomas J. Lipton, Inc. He summarizes what many writers, particularly those in the Denis Burkitt tradition, have now been saying for years. We quote:

This century has seen a marked decline in the consumption of whole wheat flour and cereals from 160 lb per capita in 1900 to less than 100 lb in 1970. Fresh fruit and vegetables have declined precipitously in use, going from 250 lb per capita in 1940, to under 180 lb in 1970. But the consumption of processed fruit and vegetables has increased in the same period from 65 lb to almost 110 lb per capita ... One conclusion is inescapable – fiber from fruits and vegetables (fresh and processed) has declined by about 20% and fiber from cereals and grains has decreased by as much as 50% in this century.\(^2\)

Next the author proceeds to discuss the relationship between fiber and atherosclerosis. He points out that atherosclerosis, the cause of most cardiovascular diseases, is the greatest scourge of Western man leading to 50 percent of all deaths past the age of 45. Says Scala:

Studies with human volunteers (Mathur et al., 1968 and DeGroot et al., 1963) confirmed by animal research (Vijayagopal et., 1973), indicate that in a low-fiber, high-blood-cholesterol population, an increase in dietary fiber will reduce blood cholesterol significantly, especially over a long period of study. When volunteers are put on a high-fiber, hypercholesteremic diet they almost never exhibit cholesterol levels as high as the low-fiber, hypercholesteremic diet controls.

The mechanism by which fiber exerts this influence involves the bile acids. People on a high-fiber diet excrete more bile acids, more sterols and fat. This implies that fiber sequesters the bile acids and sterols, thereby preventing bile acid re-absorption, cholesterol and fat absorption.

Since bile acid excretion is the main elimination pathway of internally produced cholesterol, the increase in excretion reduces the cholesterol pool. This reduction is followed by a lowering of blood cholesterol.

Heart disease is relatively rare in people who eat a vegetarian diet ...\(^3\)

Not only does a lack of fiber lead to arteriosclerosis and atherosclerosis (the major cause of death), but it also contributes to diverticulosis. This disease, where pockets develop in the bowel and lead to severe inflammation, results in major surgery for over half a million people each year. About six times that number won't undergo surgery, but are treated by other medicinal methods. Furthermore, this disease is increasing. People who suffer from diverticular disease have probably had appendicitis, polyps of the bowel, hemorrhoids, and varicose veins prior to their being aware of diverticular disease. But keep in mind, that, in some societies, such as those of rural Africa, these diseases simply don't exist. That is true also of intestinal cancer, which in the U.S. is next to lung cancer in incidence. The American male has a 600 percent higher tendency towards intestinal cancer than his counterpart in nonindustrialized societies.

Your Past and Future

Are you wondering whether your dietetic habits of the past are the reason for some of your present problems? In a book published by the University of Chicago Press, authored by Ralph W. Gerard and entitled, Food For Life, is found a list of symptoms of vitamin deficiencies. These include: "weakness, easy fatigability, constipation, loss of appetite, headache, disturbances of sleep, excessive irritability, depression, inability to concentrate, queer feelings in the fingers and toes, burning tongue, 'gas,' and many other odd bodily sensations." This does not, of course, mean that these symptoms, individually considered are always due to a deficiency, but the likelihood is there if the sufferer has been on a diet of low nutrition for a long period, and suffers these problems as a cluster.

Remember that what has been said about the bread of America also applies to our packaged cereals which, if anything, are worse in nutritional content because of the added sugar. As has been so often said, humorously but perhaps accurately, the cardboard of the carton is more nutritious than the contents of the carton. Packaged cereals often have up to 40 percent sugar. They are deadly and lethal if depended upon for nourishment. Cereal grains that have been puffed and toasted have little value left. It is much better to use your own steel cut oats bought from a health store, whole wheat, rolled oats, and hulled millet. Best of all, try cooked brown rice with some raisins or chopped dates added, and perhaps a little cream or milk.

"What have you left me?" some will cry. "Nourishment in abundance and health thrown in" is our answer. Eat freely of whole grains, fruits and vegetables, moderately of nuts, and sparingly of honey, and other natural delicacies. As you use natural rather than processed foods, your health will rise as your food bill is lowered. Life will become simpler, more joyous and more satisfying. You will be saved from a multitude of unnecessary stresses and strains including the threat of bankruptcy which, because of medical expenses, overtakes thousands each year in the USA. For detailed practical guidance see our manual on food preparation – The Inside Story.

SUMMARY

Nutrition need not be complicated. Good nutrition is a matter of eating fresh whole foods, chiefly of vegetable origin, most of the time.

Refined foods kill more people every year than all the wars in which America has ever engaged.
The vast majority of foods bought in packages are gastronomical monstrosities. They are usually laden with excessive salt, sugar and fat – the chief causes of our degenerative diseases.

High blood pressure is the trigger for major diseases and is largely caused by wrong nutritional habits, particularly the excessive use of salt.

American bread, in general, is the worst in the world.

The refining of flour has removed elements essential for the health of the heart and other organs of the body.

The removal of fiber leads to arterosclerosis, atherosclerosis, diverticulosis, and colon cancer as well as minor problems such as appendicitis, hemorrhoids, and varicose veins.

REFERENCES


Major sources on this topic include the following:


*Diet and Coronary Heart Disease*, DHSS Report on Health and Social Subjects No.7, 1974: HMSO


*Avoiding Heart Attacks*, DHSS Report, 1981: HMSO

*Prevention of Coronary Heart Disease*, World Health Organization, 1982: WHO


2. *Food Technology*, January, 1974, p. 34.

CHAPTER 11
Taking the "DIE" Out of "Diet" (Part Three)

Most people in our modern culture live on food substitutes lacking the elements of nutrition found only in unrefined food. But we err not only in the "what" of our eating, but also the "how" and "when."

* * * *

There is mounting evidence that this distorted diet, which is also too high in salt and cholesterol, underlies many of the nation's leading killing and crippling diseases, including heart attack, cancer of the colon and breast, high blood pressure, diabetes, osteoporosis, kidney and liver disease.


* * * *

Lips and Life

The greatest medical discovery of the twentieth century has been the fact that it is what we put between our lips that has most to do with how soon we are placed within the boards of a coffin. This should not be a surprise to Christians. Sin with all its horrors was ushered in by yielding to appetite. Had our first parents been obedient to God and delighted themselves in the abundance of good things and been content to leave untasted the fruit of one tree, there would have been no curse, no tears, no sorrow, no hell, and no Calvary. While God works from the inside out, the great adversary works from the outside in, and his preferred method is to begin with appetite. Scripture is emphatic that neither drunkards nor gluttons shall enter the kingdom of God (see 1 Cor 6:10). Yet such can be changed and receive eternal life.

It is deeply significant that the second Adam on the cross undid the work of the first Adam by self-control regarding appetite. He was offered a drugged drink but refused to swallow it. It offered him immediate benefits of oblivion but, as our example, he abstained, for he was consuming the most important task since creation, even our redemption. Is it not strange that human beings have long known that what they fed to their prize animals was exceedingly important, yet they have not applied the same knowledge to themselves? Men and women have even been fussy as to what they put into the engine of an automobile, and yet any contrived garbage was considered adequate for the human engine.

It is absolutely certain today that the main cause of most deaths is a wrong choice in eating and drinking. We indict tobacco and alcohol, but refined foods are responsible for far more deaths than even these. In this country over one and a half million people die every year from degenerative diseases, leaving this life many years prematurely, thus unwittingly robbing both God and man of service. Fathers sometimes leave their children when they most need guidance, and the most talented of doctors, preachers, politicians, etc. die often at the peak of their ability, when rich in experience. For a male to get through the early fifties, from fifty to fifty-five, is like fighting in the Battle of Gettysburg. His chances are the same.

Death Begins at Twenty

Deaths from heart disease begin even in the twenties. It is the major cause of death for members of the military services. The epidemic of chronic diseases is now so intense that the average family will lose two members by heart and circulatory disorders, and one by cancer. The organs that suffer most from tobacco are lungs and heart; the portions of the body that suffer chiefly from refined foods include the heart, blood vessels, pancreas, and kidneys. The liver is the greatest sufferer from alcohol, for almost all cases of cirrhosis of the liver are caused by excessive alcohol. (Cirrhosis of the liver kills one in every four adult males over the age of forty and lung cancer kills another one out of every four heavy smokers.) In urban areas about one in every six adult inhabitants is likely to be a problem drinker. We put poisonous fumes in our lungs to rob them of oxygen, we put alcohol in our stomachs to take away our brains, and for sake of appetite we eat foods that would kill our livestock prematurely did we give it to them. (We are not, however, suggesting that our modern treatment of animals raised for food is ideal. The abundant use of antibiotics and steroids is certainly detrimental.)

One need only visit a typical supermarket and survey the shelves with a critical eye to see how overwhelmingly the modern consumer is besieged with that which will do him harm. The vast majority of products in the modern supermarket are processed foods excessively rich in sugar, salt, chemical additives, and saturated fats. About every twelve years the average supermarket customer ingests well over a thousand pounds of sugar or its artificial equivalents. Polysaturated fats, which in their natural form in food, would be beneficial to the heart and the arterial system are in most processed foods saturated, by hydrogenation. When we read "vegetable oils" on the advertising of the package, we are not usually told that such vegetable oils have now become saturated, but that is the case. It's one of the greatest hoaxes of the food industry.

Frequently over television comes the advertisement where a family at the breakfast table is told that they would have to eat so many bowls of their present cereal to equal the vitamin nutrition of some other cereal. The fact is the ingesting in overdoses of eleven or so nutrients in no way compensates for the excessive sugar, salt, and chemical additives that permeate the product. Some breakfast cereals have over 40 percent sugar. In many cases the grain has been treated with such excessive heat as to no longer have value. This applies to puffed grains, for example. Excessive toasting is also deleterious. The humorous suggestion that the cardboard packaging of the cereal is more nutritious than what the packaging contains is not without merit. All should read the list of constituents found on the package. Even here subterfuge is sometimes resorted to, such as when saturated fats are set forth as vegetable oils.

The consumer should remember that foods in cans, such as canned vegetables, have sometimes lost the largest part of their vitamins. Canned and packaged foods don't have to be rejected in entirety, but considered as emergency rations.

Live Food for Live People
The next greatest mistake after the consuming of processed foods is that of having too little raw food. We would not advocate an all raw food diet which is not necessary, and would become wearisome, but we would sound the warning that a diet without raw foods is almost always lacking in essential food elements. Certain vitamins such as vitamin C and B are deleteriously affected by heat. One of the best habits any family can have is that of eating a daily salad, and at least one meal should be chiefly composed of fruit uncooked and unsweetened.

Those who cook should learn the best methods for doing so. These methods include the following: baking rather than frying; steaming rather than boiling; and a prolonged low heat rather than a fierce high one.

**How and When to Eat**

What we eat is vital, but when and how we eat is also important. Eat slowly and casually, but then make the first after-meal pursuit that of a gentle walk. This will greatly facilitate the function of the mind and body for the rest of the day. The last meal should be taken several hours before retiring to sleep. Ideally this meal should be a light one, but this is not always possible because of the family program. What is possible is to refuse just to sit hour after hour after eating. That paves the way in susceptible people for angina attacks.

It is all right for cows and other animals who chew the cud to eat at all hours, but it is doubtful that this is the best approach for human beings. Food taken between meals interferes with digestion, in most cases unless the previous meal has been something like fruit, salad, or simple grain products which are digested swiftly. Whenever a meal includes a substantial amount of fat, it requires about five hours for digestion and nothing should be taken after that meal until the next meal. Meals should be spaced by about five hours ideally. A lesser time will suit if the preceding meal was something easily digested and light. These suggestions should not be turned into rigid rules to make life a legalistic set of processes but should be seen as guidelines. It's what we do most of the time that counts. It's our habits that make or break us, not the occasional deviations for good reason. There is no need to avoid social occasions, but wise folk refuse to turn every home meal into a party.

The atmosphere of the meal table is vitally important for health. This is not the place or time for family civil war. It's not the time for negative speech in any area. Those families who choose the meal hour as a time for argument are sowing the seeds of disease, depression, and death. A meal well-chatted-over is half digested, and the ideal meal should be a social occasion that is perfectly unhurried and filled with rejoicing, gladness, and gratitude. We are fully aware that we point to an ideal that very few of us reach, but the higher we aim, the nearer we will get to the mark. One thing is certain, digestion is facilitated by happy emotions and it is hindered by unhappy emotions. God's earliest covenant with man embraced guidance about eating. The covenant with Israel was ratified by a meal of communion between God and man. Likewise the new covenant. Therefore, every meal should be treated as a sacrament and accompanied with joy and praise.

Because digestion of a substantial meal draws heavily upon physical and nervous vitality, it is important not to be excessively fatigued when one arrives at the meal table. Those who are in charge of animals never feed them or give them drink when they are exhausted. Pack horses after a long journey are rested before they are fed. Human beings have a similar constitution as regards digestion. The digestive juices are dried up by excessive concentration or heavy physical activity. Those who spend long hours at books, and then hope to eat a heavy meal successfully, will find that they are mistaken. Wherever the program has been fatigue you and the work demanding, it is wise to have a short rest before eating even if that rest is only ten minutes on the nearest floor.

The Christian who remembers the admonition: "Whether you eat, or drink, or whatever you do, do all to the glory of God" and the similar one about being "temperate in all things" has a head start as regards eating habits. We are to "eat for strength, and not for drunkeness." We will eat to live, and not live to eat, remembering that the point of surfeit is very close to the point of satisfaction. It is better to leave the table a little hungry than to leave it feeling overstuffed. Overeating is a temptation for any hearty person. Blessed is the one who has discovered that while appetite may still clamor after enough food has been taken – if one stops short of excess, within about fifteen minutes or so, appetite is allayed. The message of the appestat is not fully perceived till some time after we have stopped eating. The major reason for this is that we eat so quickly, which in itself is a vice. Sloppy food is not the best food, because it encourages hasty eating and therefore overeating. Satisfaction of appetite depends much more on the amount of time food is masticated and kept in the mouth than upon the amount of food taken.

Food with abundant fiber is the best protection against gluttony and the diseases that vice invokes.

A large number of people, about 95 percent, either have regular dental caries or periodontal (gum) disease. The major cause is refined and particularly sugary food, but a second cause is the consumption of soft foods. Unless we eat foods that require mastication, like raw carrots, apples, etc., natural unrefined foods that demand chewing, the gums will inevitably deteriorate.

To exchange your real teeth for false ones is often to throwaway ten years of life.

It is fashionable in this country to drink with meals. But the stomach must void that liquid before it can get on with the work of digestion. It would be much better to drink about a half hour before the meal, and only that drink which is without calories – water. The less liquid added to a meal, the easier it is digested. Indigestion is perhaps the most common malady of civilized man and it is the fruit of unwise eating habits.

The fewer the varieties taken at one meal, the less likelihood there is of indigestion. It is not necessary to separate protein foods from starchy foods, for in nature protein and starch are constantly combined as in legumes and cereals. The chief combinations to be avoided are sugar and milk, which tend to cause fermentation, and fruits and vegetables for those with a weak digestion. One general rule is to restrict the number of the various types of food taken at the same meal to two or three major types, except for garnishes.

Is it not strange that most of us spend many years learning the three “R's,” and yet we never learn those things that are even more important for our happiness and health? There's no university that teaches how to live. Instead, institutions of higher learning teach only how to earn a living. Yet living is the finest of all fine arts. Christians should follow the example of Daniel and his fellows in Babylon who purposed in their hearts they would not defile themselves with the ordinary diet of the times. To them God gave great wisdom and strength. Daniel lived to be about ninety years of age. To him was given the most complete
set of prophecies to be found in the Old Testament Scriptures. But we find at the opening of his book that he, like Adam, had to pass an initial test over appetite. It is not possible to perfect Christian character without that fruit of the Spirit which is too little valued – temperance or self-control. But the rewards are illimitable for those who decide that they wish to glorify God in all things and in all places, even in eating and drinking. Never forget: "great eaters, great drinkers, great 'sexers' are rarely great at anything else."

**SUMMARY**

The greatest medical discovery of the century is the fact that it is what we put between our lips that has most to do with how long and how well we will live.

Our Lord both began and ended his ministry with an example of self-control in appetite.

The next greatest mistake to the consuming of processed and refined foods is that of having too little fresh raw food.

How and when we eat are sometimes as important as what we eat.

Eating when one is tired, eating under emotional stress, eating in a hurry, all contribute to indigestion and disease, and premature death.

God intended that we should treat each meal as a sacrament, a time of rejoicing and gratitude.

With advance in years most people develop gum disease as a result of eating soft and sloppy foods rather than unrefined foods that demand chewing.

"Great eaters, great drinkers, great 'sexers' are rarely great at anything else."

Approximately three out of every four people die of diseases of the circulatory system and cancer. Nutrition is the chief factor in all three cases.

The worst dietetic habits are the overconsumption of animal products and refined foods. No field of human thought has been more vitiated by sentiment and prejudice than that of dietetics.

The processed foods we buy in cans and packages are often gastronomical monstrosities, excessively laden with salt, sugar, and fat – the very causes of our degenerative diseases.

Refining of foods not only removes a majority of vitamins and some essential minerals, but also the fiber so necessary to guard the human system against disease.

As a general rule, if food keeps, throw it out. If it won't keep, eat it up. (There are some exceptions, such as honey.)

If you want to remain alive you must eat live food. To fail to eat some raw foods every day means to fail in the necessary intake of vitamin C, etc.

One should not eat while in emotional turmoil or when very fatigued mentally or physically, or immediately prior to heavy mental or physical activity.

Eating between meals is a vice. As a rule there should be four to five hours between substantial meals, preferably five.

Food is gold in the morning, silver at midday, and clay in the evening. This is chiefly the case for people who only sit after the third meal of the day.

The Bible has examples of outstanding people whom God greatly used who were first tested over appetite.

**REFERENCES**

1. Observe a typical reaction of one medical observer:

   "As one of the growing number of physicians who have become interested in diet, it has become apparent to me that food plays a major role in the production of health and disease. Reactions to food include true food allergy, which is relatively uncommon, short-term food intolerances, psychological food aversions, and the long-term metabolic effects, which include coronary disease, hypertension, diabetes, and certain neoplasms. The importance of dietary factors in disease is that they are potentially open to modification without too much discomfort. Healthy eating can be just as pleasurable as unhealthy eating. The other major cause of disease is genetic susceptibility, but, despite a dramatic explosion in our knowledge of the gene, it is unlikely to lead to major changes in the public health at least in the short-term future.

   We now have the knowledge to reduce the incidence of coronary disease as is indeed happening in other countries, and the time has come for the medical profession in this country to tender the appropriate advice in terms which can be readily understood. The prizes are great: thus, for example, many of our hospital beds are filled with geriatric patients, often with chronic cerebrovascular disease, and much of this is preventable."  *(The Lancet, Aug. 27, 1983, pp. 516-517)*

This is a summary of the long-term proposals derived from the expert committees.

1) That there should be a standard approach to dietary recommendations for the whole population.

2) The choice of average intakes as population goals does not signify that this is the recommendation to which all people should conform.

3) Energy intakes should be defined in terms of those appropriate for the maintenance of an optimum body weight and adequate exercise. These weights should continue to be defined in terms of height and sex. No increase should be
allowed for age, and insurance statistics should continue to be used ... The public be encouraged to adjust the types of food eaten, and to increase exercise output so that adult body weight is maintained within the optimum limits of weight for height.

4) The risk of being overweight should not be exaggerated in relation to the risk of continuing to smoke, and this aspect of confusion in the public mind may need to be tackled.

5) Fat intakes should be on average 30% of total energy intake.

6) Saturated fatty acid intake should be on average 10% of total energy intake.

7) No specific recommendations should be made on increasing polyunsaturated fatty acids to increase the P/S ratio of the diet. The other recommendations will ensure an appreciable increase in this ratio.

8) No recommendation is made about lowering cholesterol intake.

9) Average sucrose intakes should be reduced to 20 kg per head per year: in calculating the sucrose content of snacks as distinct from total sucrose in the diet, a lower value of 10 kg per head per year should be taken.

10) Fibre intakes should increase on average to 30 g from 20 g per head per day, the increase to come mainly from the increased consumption of whole-grain cereals. An increase in vegetable and fruit consumption should also be advocated.

11) It would be desirable if salt intakes on average fell by 3 g per head per day.

12) Alcohol intakes should decline to 4% of the total energy intake.

13) Protein intakes should not be altered, but a greater proportion of vegetable protein developing from the other recommendations is appropriate.

14) Mineral and vitamin intakes which match the recommended allowances listed by the DHSS would be appropriate.

15) Special groups need only small additional information (e.g., on the delayed introduction of solids and cereals to infants and the need for dietary vitamin D supplements in some groups of Asian origin). The role of exercise in promoting an increase in total food intake in the elderly is particularly important.

16) Fuller labelling of foods is long overdue, and its health-educational as well as regulatory functions have to be recognized. (The Lancet, October 15, 1983, p. 904)

[No. 8 was a temporary measure. Now there is general agreement about drastically reducing cholesterol].

A survey published in 1975 indicated that U.S. doctors and medical students gleaned most of their knowledge of nutrition from the popular press. The findings were not surprising, since most medical schools gave nutrition a low priority. Even now, only about 15 out of 143 medical schools in the United States and Canada list courses in nutrition as a graduation requirement.

"A change seems to be taking place. Elective courses in the subject are now available in 100 of these schools. As Dr. Sohrab Mobarhan, a gastroenterologist at the University of Illinois, sees it, nutrition has been overlooked because it was assumed that wealthy countries did not have nutritional problems. "That attitude is beginning to change," he told the New York Times, "because research has shown that 40% of all patients who are in the hospital are malnourished." (The Lancet, August 6, 1983, p. 333)

Westernisation of food habits among Japanese people has often been adduced in evidence for a link between nutrition and heart disease, Western cancer patterns, and other "diseases of affluence." Controversy over the significance for developed countries generally of dietary change in Japan and its putative effects on morbidity and mortality continues, most recently in The Guardian (April 25), where Prof. Michael Crawford, responding to an article (April 19) which claimed that there was no foundation for a link 'between nutrition and heart disease, replied that on the contrary the epidemiology was "so tight" that the possibility of the relationships between Western diet and Western diseases not being causal was "extremely small"'.

Elucidation of the issue has now been taken forward by the Japanese themselves. In a recent briefing in Tokyo, Dr Atsukai Gunji, director of health promotion and nutrition for the health service bureau of the Ministry of Health and Welfare, said that despite Japan's having achieved the world's best figures for infant mortality (6-6 per 1000 live births) and life expectancy at birth (74 for men, 80 for women), Japanese medical authorities were very anxious about the consequences of Americanisation of Japanese food habits in the past decade and the substitution of a less varied, meat-oriented convenience food regimen for the traditional highly varied rice, fish, and vegetable diet since the '50s. He instanced particularly a rising consumption of animal fats (48% of total fat intake with a vegetable/animal fat ratio of 1-06 compared with 2-12 in 1955; Britain 0-27). He referred to the large scale introduction of "fast foods", such as hamburgers: the American McDonalds chain had a 300 million lbs. turnover in Japan in 1984. (The Lancet, May 18, 1985, p. 1150)

With Government committees and international groups of experts now advocating a change in the diet of people living in the UK and other affluent societies, it is suggested that a new approach which avoids the term balanced diet in the traditional sense is appropriate. The introduction of a greater variety of foods is unlikely to help alter disease patterns; the present need is to alter the proportions of food items consumed and to introduce new food products, while still encouraging the consumption of many different types of food.

The causes of several prevalent diseases in the UK include a major nutritional component, but these conditions are chronic diseases that develop from an excess intake or an inappropriate ratio of some nutrients in the diet. (The Lancet, September 24, 1983, p. 719)
CHAPTER 12
Meat-Eaters or Wheat-Eaters?

We need not be vegetarians but modern researchers have, in this decade, agreed that the nearer one can come to vegetarianism the longer and better one is likely to live.

And God said, “Behold, I have given you every plant yielding seed which is upon the face of the earth, and every tree with seed in its fruit; you shall have them for food.”

Genesis 1:29

"It shall be for a perpetual statute throughout your generations, in all your dwelling places, that you eat neither fat nor blood."

Leviticus 3:17

"There's death in the pot."

2 Kings 4:40

A Question of Life and Death

Here we go again. More talk about food. Why? Because your life depends upon how you satisfy your appetite! The question in our chapter title is a question of life and death. By "meat eaters" we signify those whose diet, instead of using animal foods as a garnish, permits them to regularly preponderate.

God in love made trees pleasant to the sight and GOOD FOR FOOD. "Eat ye that which is good, and let your soul delight itself in fatness" (Is 55:2) is the Word of the Lord. But that fatness is not what we usually think of as fatness. The Hebrew word is entirely different from the one in the command "Ye [shall] eat neither fat nor blood" (Lev 3:17). The word in Isaiah 55:2 means "that which satisfies," and does not necessarily refer to any animal food.

So it is clear that God wants us to enjoy our food and be satisfied by it. But that same God commanded that gluttons should be stoned, and again and again his Word condemns glutony (see Dt 21:20; Pr 23:21). On the most religious day of the year – the Day of Atonement – Israel fasted. When that hero of the faith, Daniel, was seeking God in a special way, he abstained or fasted from the delicacies of his day (see Lev 23:27 NIV; Dan 10:3). When our Lord contended with the master of all evil, he fasted forty days.

Scripture gives no specific laws for Christians about fasting, though our Lord assumes that we will fast at times (Mt 6:16). How can we reconcile these things: Be satisfied, and yet at times fast? It is not difficult. Fasting has a place to counter overindulgence, but the very best fast is to abstain from all that is harmful in the diet, and eat moderately of that which is wholesome. Such behavior is a pointer to the best fast of all, spoken of in Isaiah 58:6–14.

The Ideal and the Real

Well, what shall we eat? Must we become grass eaters (as vegetarians are sometimes called)? No, not necessarily. Some digestions have difficulty with whole grains, and in some situations an adequate vegetarian diet is hard to find. But one thing is clear from Scripture and science: the nearer we come to a vegetarian diet (all other things being equal), the better will be our health.

Why is this so? Because the main cause of death is atherosclerosis, the predecessor of heart attacks and strokes, and a multiplicity of other diseases. What has this to do with our question? Where there is atherosclerosis, in almost all cases, it is there as a result of a diet consistently high in animal products. There is not a shadow of doubt about the fact that in those countries of the world where animal products are sparsely used, there atherosclerosis is correspondingly sparse. And vice versa. Let me offer some examples:

At the time when the Chinese partook of a low-fat diet with low cholesterol, heart disease was almost nonexistent. When Dr. J.H. Foster made a study of angina pectoris among 4,000 Chinese patients in Changsa, he did not find a single instance of that disease.

In 1946 Dr. P.E. Steiner did autopsies on 150 Japanese civilians in Okinawa and found no severe cases of atherosclerosis among them. Their everyday diet was composed of sweet potatoes, rice, vegetables, soybeans, and very little meat.

Let us move to Africa. The Bantu of Uganda have lived for centuries on a low-fat diet. When Dr. H.C. Trowel did 6,500 autopsies on Bantu men and women he did not find one case of atherosclerosis. The English medical journal The Lancet reported on October 10, 1959, that "in the African population of Uganda coronary heart disease is almost non-existent."

Similarly, the West African Medical Journal of 1952 reported that out of 15,000 consecutive admissions to a Bantu hospital in Southern Rhodesia, there was not a single case of coronary heart disease.

India and Japan tell the same story. Chiefly keep in mind the existence of 500 million Hindus in India. They eat no animal products throughout their whole lifetime.
In Mexico and Guatemala are millions of Amerindians who subsist on low-fat diets. A study of over 10,000 clinical cases states that "the complete absence of myocardial infarction in the Indian race was striking."

Repeated studies have shown that these results cannot be attributed to the greater infant mortality, or similar problems. The fact is that among those in the nonindustrialized nations who live into their sixties and seventies, the number of deaths due to atherosclerosis is but tiny, when compared to their U.S. counterparts. Nor does the issue of heredity explain the phenomenon. When people from the Third World move to the USA, they also become subject to the heart disease of this country, especially the second generation, and thereafter.

Reprinted from Why You Don't Need Meat, by Peter Cox.

During the Korean War, headlines appeared in U.S. papers. Autopsies had been performed on American servicemen, all of them comparatively young men:

HEART DISEASE DISCOVERED IN GI'S KILLED IN ACTION
YOUNG MEN HAVE HEART ILLNESS
3 OUT OF 4 YOUNG SOLDIERS SHOW CORONARY LESIONS

Yet, when simultaneous autopsies were carried out on the Korean dead, the results were the opposite. The Koreans were not afflicted with atherosclerosis.

In Military Medicine (March 1962), Colonel W.J. Walker wrote: "Atherosclerosis is the leading cause of death from disease in active-duty personnel in the U.S. Army." The average age of death from this cause was 43.

We have known for a long time that animals fed a high-fat diet develop atherosclerosis. The case is identical with humans. But particularly observe that it is animal fat which causes the problem. Animal fats are saturated fats and trigger cholesterol deposits which result in heart attacks. Vegetable foods contain unsaturated fats which have an opposite effect on the arteries – they are protective, rather than disease-creating.

The Bible does not forbid the eating of meat. It presents it as an excellent emergency food. But when eaten, it was to be consumed without the fat or blood. "Ye [shall] eat neither fat nor blood" was the law to ancient Israel. That law is not binding upon Christians, but it remains an advisory health counsel for us.

Those who eat largely of animal products are preparing for a premature decease. Their diet will be high in saturated fats, sparse in fiber, excessive in protein, probably low in B6 (which vitamin, according to many researchers, is protective of the artery linings); and by virtue of crowding out uncooked, live vegetable foods will probably result in a diet low in vitamin C. The excessive protein and phosphorus hinders the absorption of dietary calcium, and paves the way for osteoporosis.

Too Little Protein?
Many will cry, "But how shall I get enough protein if I do not eat largely of meat?" The answer is that the protein bugaboo has been laid to rest for decades. The earlier conception that a diet was at risk unless high in first-class proteins is now recognized as erroneous. Those who eat a normal amount of food from a variety of vegetable sources cannot help but get adequate protein. Indeed, most healthy vegetarians consume two or three times as much protein required by the body. The amino acids are complementary, and the concern over first-class proteins is now seen as outdated.
In perhaps no other area except religion is there so much prejudice and ignorance as in the matter of dietetics. Being a comparatively young science, it took until the 1970s to iron out most of the basic issues, and undo the superstitions. But today it is recognized, beyond a shadow of doubt, that the majority of premature deaths are the result of wrong choices as to what passes between our lips. Tobacco, alcohol, unwisely selected drugs, and excessive use of animal products – meat, eggs, milk, cheese – constitute the reasons for the early deaths of over a million people a year in the USA. Even mature-age onset of diabetes is being linked with the excessive use of animal products.³

Let us repeat the essence of the matter:

Heart and blood vessel diseases are responsible for over 50 percent of deaths in industrialized countries. Wrong diet is the chief cause of these diseases.⁴ Cancer accounts for over 20 percent of deaths, and the chief causes of the major cancers are tobacco and wrong diet. (By "wrong diet" we mean a diet deficient in fiber-rich, vitamin C and A rich fruits and vegetables, and whole grains (vitamin B and K)). A "wrong diet" also contains dangerous amounts of saturated fats, cholesterol, and excessive protein and phosphorus. To absorb the truths of these lines may save you from an early death, and enable you to be a good steward for the Redeemer.

SUMMARY

Meat is an excellent emergency food, but to use it regularly other than as a garnish invites disease. Vegetarian groups or societies do not suffer from the typical Western diseases.

REFERENCES

1. The reader is referred to the following articles:

2. The reader is referred to the following articles:
See Dr. J. McDougall's books for a more complete listing. We have here drawn from his bibliographical materials.
CHAPTER 13
Cancer, Heart Disease, and Fats

The chief causes of death are preventable. One dietary habit changed – the excessive use of fats – could save much unnecessary pain and add a decade or more to life.

* * * *

We now know enough to prevent at least two-thirds of all cancers. The major clue has come from studies in scores of countries. These studies demonstrate that the incidence of breast, colon, and prostate cancer is proportional to the animal-fat intake of the national diets. With this information readily available, from now on most new cancers will be cancers of either choice or ignorance.

D.F.

* * * *

When I behold a fashionable table, set out in all its magnificence, I fancy I see gouts and dropsies, fevers and lethargies, with other innumerable distempers, lying in ambuscade among the bushes. Nature delights in the most plain and simple diet, every animal, but man, keeps to one dish. Herbs are the food of this species, fish of that, and flesh of a third. Man falls upon everything that comes in his way; but the smallest fruit or excrescence of the earth, scarce a berry or a mushroom escapes him.

Addison

* * * *

Good health is a lifeline to all else. But that the chronic diseases have become the nation's major health problems is apparent from a few statistics: At the turn of the century, one in seven deaths was due to heart disease and stroke; today, that ratio is one in every two. Cancer has joined heart disease and stroke in a destructive assault on the middle advanced years. But chronic illness is also a major concern of youth. For most chronic diseases, cure, as is generally understood, remains unlikely.


* * * *

Most Cancer is Cancer of Choice

The very word “cancer” conveys dread. Yet the many diseases grouped under this single heading take less than half the toll of cardiovascular diseases. Many cherish the illusion that the latter offer an easy exodus from life's trials including sickness, whereas cancer is seen as a terrible route.

As usual the facts and the traditional views are considerably different. Most cancers are not greatly painful until their course is almost run; whereas half of those who have had a heart attack are liable to lead a miserably attenuated existence often transcending the suffering of cancer patients.

There is another myth. Most moderns think that the pollutants of their environment are the chief cause of cancer. The fact is that cancers induced by X rays, food additives, atmospheric pollutants, etc. amount to less than 10 percent of cancer deaths. Most cancer is triggered by what we put between our lips – tobacco in all its forms, and a diet that lacks vitamins, minerals, and fiber and contains excessive fats.

From all over the world epidemiological studies are indicating that refined foods and excess fats are the chief causes of cancer (apart from tobacco which is responsible for 30-40 percent).

Dr. Alabaster, who for years has been engaged in cancer research, has this to say:

It is no secret that the modern American diet is mostly bad, and getting worse. Since the turn of the century, the consumption of meats, dairy products, refined sugars, and processed foods has increased tremendously, while the consumption of fresh fruit, fresh vegetables, milk, and grain products has steadily declined. This high-fat, high-sugar, high-calorie, low-fiber diet has resulted in an epidemic of degenerative diseases and cancer that have already affected or will eventually affect most of us in one way or another. These diseases are almost unknown in societies where the diet is low in fat and high in fiber, and they are increasing in countries like Japan as some Western dietary habits are adopted. The lessons are obvious.1

Alabaster's contentions are finding wide support among most other cancer researchers. Dr. C. Wayne Callaway writing for *JAMA*, October 26, 1984, said:

In 1980, the US Department of Agriculture and the Department of Health, Education, and Welfare jointly published the "Dietary Guidelines for Americans," which stated: eat a variety of foods, maintain ideal weight, avoid too much fat, saturated fat, and cholesterol, eat foods with adequate starch and fiber, avoid too much sugar, avoid too much sodium, and if you drink alcohol, do so in moderation. Subsequent reports of research, symposia, and expert panels have tended to support the overall message of the guidelines.2

To understand the relevance of such general dietary counsel, it is important to remember that typical western foods lead to typical western diseases. Thus we are talking about a dietary pattern, not just isolated foods. Nevertheless, it is the excessively refined nature of the western diet and its heavy emphasis on fats which triggers most diseases.
The journal *Science* in its September 1984 edition, carried excellent reports of our contemporary understanding of cancer and its causes and treatment. On page 34 of this edition Haydn Bush reminded readers that, despite claims from the mass media, traditional treatments for cancer offer little more hope than a generation ago. We quote:

We're not curing much more cancer than we were a generation ago. The death rates on the whole just haven't changed significantly.

There has been very little progress on the biggest cancer killers of the last 25 years — cancer of the lung, the breast, the colon, and the prostate. The death rate has not declined appreciably for any of these, and for lung cancer it has actually risen. Of all the more common forms of cancer, death rates for only two have declined substantially in recent decades: stomach cancer and uterine cancer. But this may be less a result of better treatment than of, in the first case, a declining incidence and, in the second, earlier diagnosis.

For many kinds of cancer it doesn't even make much difference what kind of treatment is used. Most studies seem to reveal no difference among the treatment outcomes.

These conclusions are well illustrated in the history of breast cancer management. Between 1950 and the late 1970s dozens of studies compared the survival of patients treated with various kinds of surgery from radical mastectomy to mere "lumpectomy," with and without radiation or drugs. The results have shown little survival advantage for any treatment. Since the less radical treatments are just as helpful as the most radical, the trend has humanely been toward the less disfiguring procedures.

*Science Digest* of August 1985, is more positive in its counsels:

"Diet may be related to as much as thirty-five percent of all cancer deaths in the United States," says Peter Greenwald, director of the Division of Cancer Prevention and Control at the National Cancer Institute (NCI). Three recent studies support this assertion. Researchers don't agree on which factors are most important, but one consensus has been reached: Eat less, but eat more vegetables, fruits and whole grain cereals.

### Faulty Diet: Chief Cause of Cancer

Other authorities are emphatic that 50 percent or more of cancer is diet related. Kristin White's book *Diet and Cancer*, published by Bantam Books, New York, 1984, gives an excellent summary of what the most up-to-date writers are saying:

... the predominating types of cancer vary from one country to another, and ... the differences tend to correspond to national differences in what people eat.

Throughout the Western industrialized world, with few exceptions, colon, breast and prostate cancers are major killers. However, colon cancer is quite uncommon in the Third World. Breast cancer, for most of this century, was rare among Japanese women; prostate cancer occurs less frequently in Japan than anywhere else in the world...
The NAS Committee on Diet, Nutrition and Cancer, referred to above, affirmed that the most common forms of cancer "appear to be determined more by habit, diet, and custom than by genetic differences." Observe it is the main cancers that are nutritionally linked. Breast, colon, and lung cancer are the chief cancer killers and all now are recognized across the world as being diet-related. This is true also of seven other forms of cancer: cancers of the mouth and throat, esophagus, stomach, prostate, ovary, uterus, and rectum.

The dietary genie most notorious is excessive fat. Americans consume 40-45 percent of their calories in fat – more than any other country of the world except Finland. But a fatty diet is usually also a diet of refined foods. We repeat; it is the whole western way of diet that is causative of the whole gamut of western diseases. No single food triggers just a single disease. The evidence is now clear that foods rich in fiber (unrefined, unprocessed foods) counter to a degree the ill effects of excessive fat intake, and this is especially true of colon cancer.

![Image](DEATHS_FROM_MALIGNANT_CANCER_CORRELATED_TO_DIET_ISRAEL_STUDY.png)

Reprinted from *Why You Don't Need Meat*, by Peter Cox.

**Halting Cancer**

Let it not be thought that this is all bad news. When we keep in mind that the proper diet to avoid cancer is also the diet that gives protection against other killers including heart disease, diverticulosis, obesity, and diabetes, we should rejoice at the tidings. Furthermore, the indications are that many conditions heading towards fatality can be interrupted and even reversed by a change in dietary habits. Cancer develops by stages and whether early cell damage spreads depends upon what happens at later stages. What is known as the promotional stage can be halted in many instances by a change of diet, namely a lessening of fat intake (especially saturated fats and refined oils) and a concentration upon unrefined foods.

Is it not the best of news, healthwise, to know that most cancers can be prevented? Wise researchers in the field of cancer are now saying that the search for a cure has failed but that the day of prevention has dawned. Why do they say this? For the following reasons:

Epidemiological studies show that the incidence of colon and breast cancer is far from uniform around the world. Rather these cancers are tied to national habits, especially dietary habits. Japan, the Philippines, and Thailand have only one-fifth the breast cancer of western nations such as the USA. Second, within any country, but especially the Third World countries, cancers of colon and breast are more common among the rich than the poor, the ruling class rather than the governed.

![Image](INTERNATIONAL_CORRELATION_OF_INTESTINAL_CANCER_AND_DIET_37_NATIONS_STUDY.png)

Reprinted from *Why You Don't Need Meat*, by Peter Cox.

But with stomach cancer it is the reverse. Third, when immigrants move to a new country home they "change cancers." That is, the cancer most likely to develop is that of the new country, not their country of origin. All of this amounts to the simple fact that cancer should not be regarded as unavoidable and inevitable. Many people are missing the chief cancers, and so can most of us.
What dietary habits are now proposed for those bent on doing their part to avoid cancer? We have hinted already at the main changes. Fatty foods (especially animal fats and refined vegetable oils) must be reduced; and unrefined food with fiber must be made the chief constituent of the diet. What other specifics can be suggested?

Foods rich in carotene (the precursor of Vitamin A), Vitamin C, and foods of the cabbage family particularly, are the best bet for all of us. The Committee on Diet, Nutrition and Cancer made these recommendations:

- Eat fruits, vegetables, and whole grain cereal products daily – especially those fruits and vegetables rich in vitamins A & C. Also emphasize those vegetables belonging to the cabbage family.
- Reduce fat intake by 25 percent.
- Eat very little salt-cured, salt-pickled, and smoked foods, such as sausages, ham, bacon, bologna, and hot dogs.
- Drink alcohol only in moderation.5

The Medical Journals Agree

Medical journals of every country are now buttressing such conclusions as indeed some were doing before the findings mentioned above. Consider the following extract from a letter by Dr. Alton I. Sutnick, published in the New England Journal of Medicine, Vol. 303, No. 16, p. 945:

In 1979 we were invited by the World Health Organization to address the cancer problem in India, as the first recorded joint Soviet-American health mission to a third country. In India the incidence of cancer and its mortality appear to have increased in recent years, with 500,000 to 700,000 new cases per year and an estimated mortality of 500,000 in 1978.

... Individual hospital statistics clearly indicate that the two organ sites most commonly involved are the uterine cervix in women and the oral cavity in both sexes. These two sites represent approximately half the cancer cases in the country, with oropharyngeal cancer about 1.5 times as prevalent as cervical cancer. Control of these two kinds of cancer would provide the major part of cancer control in India.

There seem to be several causative factors in these two principal cancers. Oropharyngeal cancer appears to be associated with chewing pan (a mixture of betel nuts and various seeds and spices, usually including tobacco in a betel leaf) and smoking bidi (a crude tobacco cigarette). Cervical cancer is probably related to the poor genital hygiene found in many women, the early age of marriage, and multiparity. It may or may not be related to the absence of circumcision among Hindu husbands.

Those who are foolish enough to chew tobacco should carefully consider the above reference to the chewing of a mixture including tobacco in a betel leaf. In Asia generally, cancer of the mouth and lung are the most common forms of cancer and are caused by this vice of tobacco chewing. Consider also the following extracts from an article in the same journal some years before:

Rural black populations eating very large amounts of vegetable products, with dietary-fiber contents of over 50g per day, seem to be free from appendicitis, diseases of the colon – diverticulosis, polyps or cancer – and to suffer less from ischemic heart disease, diabetes and hiatus hernia, which have become so common in western society over the past two hundred years. They have large colons, pass stools weighing more than 250g per day, and, if they survive the hazards of infections in early life, seem to enjoy a reasonable life expectancy. Furthermore, it has been observed over the past 20 years that as they have moved to the cities and adopted western habits, including the diet, they are beginning to suffer from these same western diseases.

... There seems little reason to doubt that large populations excreting stools greater than 250g in daily bulk have less appendicitis, colonic polyps, diverticulosis, and cancer than is found in countries where the stool bulk is less than 150g.

It is unlikely that dietary fiber will be regarded as an essential nutrient in the classical sense, but some range of intake – say, 30 to 60g per day for an adult – may be found to be both feasible and “protective.” There is now enough
evidence that our present diet – high in animal protein, saturated fat, salt and sugar – is probably not salubrious and is wasteful of economic energetic factors needed to produce it. One could quite readily decrease its unhealthy features by 30 per cent, and replace the calories by increased consumption of whole-grain cereals and bread, potatoes, vegetables and fruits.\(^6\)

**U.S. News & World Report** of January 20, 1986, on page 67 had an article "Experts' Recipes for a Healthy Life" stressing the relation between nutrition and cancer and heart disease risks. We quote:

Most significant is the identification of nutrition as a major cause of some of the most serious killer diseases – atherosclerosis, heart disease, cancer and diabetes. The evidence for a relationship between fat and cholesterol and coronary-artery disease has become so solid, only the most diehard would deny it.

The consensus is that Americans should be eating less fat, cholesterol, sodium and refined sugar and eating more starch and dietary fiber.

**Dietary Reform Is Now Orthodox**

Let it be emphasized that we are not giving the views of fanatics and crackpots but of hardheaded research scientists. And in essence they are all saying: Let us change the fashionable diet of affluent countries and return to the simpler diet of earlier centuries when animal products were only used at a minimum, and unrefined vegetable products constituted the chief dietary fare. Again we quote Dr. Albert I. Mendeloff:

> British workers in Africa noted the remarkable rarity among rural blacks of diabetes, ischemic heart disease, hiatus hernia, appendicitis and colonic diverticulosis, polyps and cancer; other ethnic groups in Africa eating western-type diets and enjoying more nearly western life-styles manifested these disorders in frequencies approaching those seen in Europe and North America. These workers speculated that the crucial difference between the lifestyles of rural blacks and those of the more westernized groups was in their diet, particularly in the amounts of "roughage," or "fiber," consumed. To Trowell is owed the physiologic term "dietary fiber," which he most recently defined as "the plant polysaccharides and lignin which are resistant to hydrolysis by the digestive enzymes of man." Two excellent books giving necessary background for an understanding of this subject are currently available: one by the pioneers Burkitt, Trowell and their associates; and one, representing a more laboratory-oriented and nutritionally based look at the subject, edited by Spiller and Amen.\(^7\)

Admittedly, some cancer blame can also be laid at the door of lesser dietary errors. There is a well-known link, for example, between artificial sweeteners and bladder cancer. Here are extracts from two letters in the same medical journal:

> The results of this paper indicate clearly that artificial sweeteners may well be a noteworthy cause of bladder cancer in women, especially nonsmoking women; this must be a sobering note for heavy users of artificial sweeteners.

> To view saccharin consumption as a "risk factor," or to say that it poses "little or no excess risk," as Morrison and Buring do, is to miss the point in a spectacular way. From the standpoint of public policy there is an enormous difference between "little risk" and "no risk," since little risks multiplied by huge populations produce substantial and unacceptable burdens of morbidity and mortality.

> The evidence that saccharin poses a cancer risk rested on very solid scientific data. Virtually everything we have learned since then has confirmed that original judgment.\(^8\)
Observe also that there continue to be reports of nonfood causes of cancer, for example radiation:

The report of the Advisory Committee on the Biological Effects of Ionizing Radiation estimates the relative risk of radiation leukemogenesis as a 2 to 3 per cent increase per rem.

There is no question that ionizing radiation in large enough doses induces leukemia.⁹

Every medical journal in the world is climbing on the same bandwagon. Even such a traditional one as JAMA in 1980 could today say as regards nutrition:

The area of nutrition has been neglected by the medical profession ... Physicians in the United States are not required to have any understanding of nutrition to be licensed to practice medicine.

This situation is in striking contrast with increasing evidence that a large proportion of patients in our hospitals are malnourished.

Numerous uncontrolled series indicate nutritional therapy is beneficial in many disease states.¹⁰

The increasing coronary risk according to prior cholesterol level among 8,000 men followed for ten years in the American Heart Association Pooling Project is shown here. As the cholesterol level increases from less than 175 to 300 milligrams per 100 cubic centimeters and over, the rate of heart attack increases almost fourfold.

Heart Disease Is Also the Usual Result Of Poor Nutrition

While we have been speaking chiefly about cancer, all that has been said is relevant for the greatest killer of all – cardiovascular disease which takes about 1 million people a year in this country, often decades prematurely. Time magazine of March 26, 1984, dramatized the most recent discoveries in this field. It can no longer be debated that the role of cholesterol
is unknown in heart disease. The evidence is now overwhelming that those who use large amounts of cholesterol and saturated fats are suiciding. Cholesterol is only found in animal products and saturated fats. We refer again to *The New England Journal of Medicine*, this time an editorial:

What is clear, at last, is that reduction of serum cholesterol concentrations is relevant to the prevention of coronary heart disease.\(^\text{11}\)

Risk of heart attack and stroke increases with the number of risk factors present. As an example, this chart uses risk factors of an abnormal blood pressure level of 180 systolic and a cholesterol level of 310 in a 45-year old man.

\[
\text{Heart attack} \quad \text{Stroke (Atherothrombotic brain infarction)}
\]

\[
\text{Average risk}
\]

\[
\text{None} \quad \text{Cigarettes} \quad \text{Cigarettes and cholesterol} \quad \text{Cigarettes and cholesterol and blood pressure}
\]

Source: The Framingham, Mass. Heart Study

When we discuss coronary heart disease, we are dealing with a condition that was rare seventy years ago. There is only one literary description of angina in Graeco-Roman times, none in Medieval and Renaissance eras, and only one in the seventeenth century. William Osler, by 1910, had not seen a single instance before he became a Fellow of the Royal College of Physicians in the United States, while Dr. Paul Dudley White tells us that he saw his first case of ischemic heart disease causing angina in his second year of private practice which was 1921. Observe the following comment from James Mount who also itemizes the information just given:

Could heart disease be prevented? In large measure, yes. The ideal diet would be low or absent in sugar, low in refined carbohydrates, low in animal fat and high in vegetables and fruit. It need not necessarily be frugal but should avoid heavy meats (beef, mutton) and meals should be light. In other words the evidence here presented favours the 'McCarrison diet' a diet based on whole grain cereals, fruit and vegetable and light meat. A simple solution and not at all impractical but unlikely to be taken up by the majority of people. Habits and food habits particularly die hard, and until the evidence is overwhelming the majority are unlikely to be moved.\(^\text{12}\)

Consider the fact that since 1900, deaths due to heart attacks have increased 500 percent, and those of diabetes 250 percent. Yet these problems are virtually unknown in primitive societies and are slight in Japan, Italy and Greece where less saturated fat is used.
For many years nutritional science wandered in a side alley as it recommended the regular intake of polyunsaturated fats. Because, for those consumers, this meant the use of refined oils, the advice was actually dangerous. More recent knowledge links these oils with the increased likelihood of cancer. Another side alley which has delayed some in making the changes they should have made was the idea that low cholesterol could be causative of cancer. A recent issue of *The New England Journal of Medicine* rebuts that error. There we read:

The epidemiologic data on the possible correlation between serum cholesterol levels and cancer risks are therefore conflicting. To some extent, this could be due to the fact that many of the studies were based on relatively small populations, with short follow-up and few cases of cancer, or that they were primarily designed to study the risk of cardiovascular disease.

Subjects with serum cholesterol levels below 225 mg per deciliter (5.8 mmol per liter) had a lower relative risk of both colon cancer and rectal cancer, as compared with those with higher serum cholesterol levels. A smaller group – those with cholesterol levels below 190 mg per deciliter (4.9 mmol per liter) – had the same risk of colon and rectal cancer as the rest of the group with levels below 225 mg per deciliter, though the risk figures were based on a small number of cancers. Only 14 of the 528 persons (2.7 percent) with colon cancer, 6 of the 314 persons (1.9 percent) with rectal cancer, and 4.3 percent of the total population had cholesterol levels below 190 mg per deciliter.

A possible explanation for the observed inverse relation could be that patients in whom cancer was diagnosed within a couple of years of examination had had subclinical cancer at the time of the screening examination, and that the cancer had depressed their serum cholesterol levels.

Several possible mechanisms have been suggested to explain the observed associations between high dietary fat intake and colorectal cancer. A high fat intake over a long period will increase the serum levels of cholesterol and beta-lipoprotein. Increased consumption of fat also increases the secretion of bile acids, resulting in higher levels of deoxycholic acid and lithocholic acid in the large intestine. These secondary bile acids have been found to promote tumors of the colonic mucosa in animals.\(^1^3\)

How much fat, then, should we regularly include in our diet? The amount of essential fatty acids needed for optimum health is very small. Some researchers say that just a few spoonfuls of oatmeal daily would contain all that was needed.\(^1^4\)

These curves are plots of different cholesterol levels, from lowest to highest. The dotted line curves are the most frequently encountered cholesterol level and represents the present situation for American adults and children. The broken-line curves are those thought desirable and feasible with continuation of present trends in eating patterns. The solid line curves are ideal with respect to population having the fewest heart attacks.
It is true that the body needs fats to metabolize its fat-soluble vitamins A, D, and E, but the body itself can manufacture these.

**The Reasons Why**

More and more scientists suspect the lavish use of fats for the following reasons:

1. As even the World Health Organization has recognized, there is a connection between the major cancers and excessive fat ingestion.
2. Fats impede carbohydrate metabolism and can trigger diabetes.
3. Fats raise cholesterol levels and uric acid levels accentuating the risks of atherosclerosis and gout.
4. Excessive fats in the blood stream tend to sludge and cause capillary blockage.
5. Pesticides and other chemical pollutants have a cumulative impact upon the body through their fat cell depositaries. Such pollutants are least concentrated in vegetable foods but become more concentrated in oils, fats, dairy products, meat, fish, and poultry.
6. Saturated fats, like sucrose, constitute a form of empty calories. They are not a needed part of a good diet though inevitably there is a small proportion of such even in a vegetarian diet.

In practical terms, to avoid unnecessary risks as regards cancer, heart disease, diabetes, obesity and other ills, keep your fat intake to approximately 15-20 percent of your calorific intake, somewhat higher if you are unusually active and less if your diet has been bad for decades. Remember that the fat content of food should be calculated by dry weight not net weight. Red meats are about 50 percent water, and fat content could be declared as being only 25 percent, whereas in reality the fat calories are at least 70 percent of the total. Avoid not only the saturated fats of animal products in significant amounts, but also the hydrogenated fats of processed foods, and the refined oils at present so popular. It is only a matter of time before researchers, in general, having protested against refined sugar and refined flour, will take the same stand regarding refined oils. Already the evidence is accumulating that the popular habit of increasing polyunsaturated oil intake by using the refined product is contributing to cancer.

Rejoice that the evidence in these important issues is the clearest it has ever been. While environmental and heredity factors can affect all of us, the casting vote about disease is usually in our own hands. What we choose to put between our lips is the key factor. Remember health is that which enables us to live most and serve best. The quality of health and therefore the quality of life depends largely upon the quality of our diet. Heed the admonition of Scripture: "Eat ye that which is good ... why do ye spend your money for that which is not bread?" (Is 55:2).

And now, just one postscript: We say it again: "What God hath joined together, let not man put asunder." Even in Eden God joined exercise with diet. We commend to you the following:

- Exercise, too, can influence the risk of cancer as well as chances of contracting heart disease. A study at the University of Southern California found that men who had sedentary occupations had a much higher colon-cancer rate than those whose jobs required physical activity.19

(These recommendations are not meant to be taken as a substitute for the counsel of a good doctor when the situation demands such. Sometimes symptoms not overly significant in themselves may be linked to a larger problem of great importance which a good doctor will recognize.)

**Worldwide Incidence of Cancer by Type** – thousands

<table>
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<th>Cancer Type</th>
<th>Incidence</th>
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<tr>
<td>Bronchial/Pulmonary</td>
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<tr>
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<td>Prostate</td>
<td>197.7</td>
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<tr>
<td>Leukemia</td>
<td>175.7</td>
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<tr>
<td>Bladder</td>
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</tbody>
</table>

Figures from most recent survey: 1975 source: The World Health Organization

**SUMMARY**

Most cancer is preventable – 80-90 percent.

Excessive fats are the primary cause of the major cancers.

When refined foods are linked to excessive fats the danger is multiplied.
Nations which eat little fat but much unrefined foods have little cancer.

X Rays, pesticides, pollution and food additives contribute to only about 10 percent of cancer.

REFERENCES

FACTORS RESPONSIBLE FOR CANCER – PERCENTAGE OF ALL DEATHS

<table>
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<tr>
<th>Factor</th>
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<td>Infection</td>
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CHAPTER 14
The Favorite Among the Seven Deadly Sins

Christians often feel condemned because they know they are guilty of overeating thus defrauding God and their fellowmen of service. But gluttony can be overcome by practicing some very simple principles, such as avoiding those foods which require little chewing. Only after adequate chewing does the appestat in the brain tell us to stop eating.

***

Do you not know that in a race all the runners compete, but only one receives the prize? So run that you may obtain it. Every athlete exercises self-control in all things. They do it to receive a perishable wreath, but we an imperishable. Well I do not run aimlessly, I do not box as one beating the air; but I pommel my body and subdue it, lest after preaching to others I should find myself disqualified.

1 Corinthians 9:24-27 RSV

***

Living to Eat

During the Middle Ages much was said about gluttony as one of the Seven Deadly Sins. Today, the pulpit rarely names it, although more than one-third of Americans are dangerously overweight.

The biblical counsel, not to judge one another but rather be careful to do nothing that would cause another to stumble, is most appropriate here. It is not our duty to separate the wheat and the tares, the sheep and the goats, nor the gluttonous from the temperate. Apart from Christian principle there are other good reasons for not falling into the sin of critical judgment (which is a worse sin than gluttony – see Rom 2:1 ff), not the least of which is that there are also many "skinny sinners" who are just as gluttonous as their obese friends, but whose different metabolism yields different results. In some instances the body loses weight in its fight to contend with dietary overload.

Then it should also be kept in mind that the psychological pressures which cause some thin people to be bad-tempered lead other folk to overeat. Who would you rather live with – someone bad-tempered, or someone who ate more than was good for them?

Because our heredity and early environments were none of our own choosing, not one of us has the right to allot praise or blame to those who have been running life's race with a head start or a handicap. It is one of the strangest features of individualized human nature that it considers it legitimate to excuse its own sins and condemn those of others.

But while we should not judge others as to the sin of gluttony, we should be unsparing regarding ourselves. Both the Old and the New Testaments suggest that gluttons, like drunkards, may keep themselves from the kingdom of God by their cherished vice. Here again the stern warnings are but the expressions of love. God cares for us more tenderly than any father, and longs to see us choosing only the ways of health and joy. He knows better than we do that Christian maturity can never be attained by a glutton, and that the person who indulges the flesh at one point is likely to yield at other points. He knows too that "great eaters, great drinkers, great 'sexers' are rarely great at anything else." In all our affliction he is afflicted, and that includes the sorrow of the soul bowed down continually with self-reproach.

How to Avoid Overeating

"Ye shall know the truth, and the truth shall make you free" (Jn 8:32). This applies physiologically as well as spiritually. There are simple steps that can be taken to prevent gluttony. Here are some of them:

1. Exercise adequately. Not in order to lose weight primarily, but because the appestat is properly conditioned only in a body that is regularly exercised.

2. Don't rely on food for your satisfaction in life. Bored people tend to overeat, whereas those with other consuming interests rarely do.

3. Don't eat refined foods. It is here that the crux of the matter lies. Foods without natural fiber are too easily swallowed, and the messages that should go to the appestat after much chewing get there too late. The person who eats plenty of fruits, vegetables, and whole grains rarely overeats.

4. Avoid sloppy foods. Anything that goes down the red lane swiftly should be avoided. The more obviously moist the food, the more it encourages overeating. This applies not only to stews but to desserts.

5. Take a glass of water about twenty minutes beforehand and eat an apple or two before you begin your meal.

It is not by chance that Scripture links the first sin with appetite. When Eve saw that the fruit of the forbidden tree promised gustatory delight, she took it and gave it to her husband. This unleashed the whole deluge of sin and woe for humanity. In contrast, our Lord denied appetite for forty days in the wilderness, overcoming for our sake before entering upon his ministry and ultimate atonement.

While God, through the gospel, begins at the heart and works outwards, Satan does the reverse. He begins with our senses and then ultimately conquers the heart and mind. We need not be ignorant of his devices and neither need we be overcome. Christ has already vanquished our great adversary and his victory is for us and may be claimed by faith. Study Romans 6 closely for the secret of victory over every variety of temptation.

In eating, as sometimes in working, less can in the long run mean more. Temperance, practiced at the meal table, renders all the other activities of life easier, particularly the battles with temptation and temperament.
SUMMARY

Gluttony is often the result of ignorance, not wickedness. Unrefined foods eaten without liquid addition require much chewing which in turn prompts the appestat to signal us when enough nourishment has been taken.
CHAPTER 15
The Blood is the Life – Or Death

The chief single cause of death is high blood pressure, and it is also the chief reason for medical prescriptions. The healthiest of people have blood pressure 120/80 or less, and it remains that all their lives. They will live the longest, and as regards the quality of life, the best.

* * * *

From one viewpoint, man is just a bundle of portable plumbing. His continued existence depends upon the quality of that plumbing and the life-giving fluids it circulates.

* * * *

LORD, make me to know mine end, and the measure of my days, what it is; that I may know how frail I am.

Psalms 39:4

* * * *

In every new and smart disease, From housemaid's knee to heart disease, She recognized the symptoms as her own!

G.W. Carryl

* * * *

The fate of a nation has often depended on the good or bad digestion of a Prime Minister.

Voltaire

* * * *

He is the best physician who knows the worthlessness of the most medicines.

Benjamin Franklin

* * * *

They live that they may eat, but Socrates eats that he may live.

Athenaeus

* * * *

Your Most Important statistics

The chief single cause of death is high blood pressure and it is also the chief reason for medical prescriptions. Only rarely does high blood pressure begin after the age of fifty. For the great majority of sufferers the first indications of hypertension come about the age of thirty, and for such people, unless the disease is rectified, death may come between fifty and fifty-five.

In 1968 Dr. Thomas R. Dawber, medical director for investigation of high blood pressure in the Framingham Experiment, declared: "We should pay more attention now to borderline blood pressure levels. If we could keep blood pressure down, it would do more good than anything else."

Of course, such important facts have been known for a long time. Wrong. As late as the 1930s many medical men thought that elevated blood pressure was a good thing. They would not have dreamed of doing anything to lower it. At that time there was no effective treatment for high blood pressure and no treatment was sought by most physicians. Until the twentieth century, chest pain and sudden deaths from heart attack were rarely linked. It was about 1909 that, for the first time, German researchers began to connect chest pain with trouble in the coronary arteries.

It may seem enough that the experts knew nothing or next to nothing about the urgent necessity of correcting high blood pressure until so late. (It was not until after World War II that light dawned upon the majority of doctors on this important subject. Insurance companies had a good deal to do with the convictions that were developing. At the end of the 1950s the Society of Actuaries published a study analyzing the data of 4 million lives and over 100,000 deaths. And this data made it clear that blood pressures over 140/90 were abnormal at any time and inevitably led to increased mortality. Even small elevations of pressure were found to hasten death.) But the other half of the story is that even today in the 1980s probably half the people that nourish this silent time bomb in their arteries are unaware of the fact, and millions will die in their ignorance. On one occasion the American Heart Association, during a special investigation of workers at a large Michigan factory, found that over 900 employees had high blood pressure, and that over 700 of these didn't have a clue regarding their problem.

There hardly seems any way of exaggerating the importance of our topic. Let us remember that heart disease is the biggest killer of our times, and that high blood pressure is secondary only to the problem of cholesterol. A combination of both produces the greatest amount of artery blockage in the shortest time and therefore triggers coronaries. When Dr. John W. Goffman wrote his book Coronary Heart Disease, he estimated that as diastolic pressure goes from 60 to 70 the risk of heart attack doubles, from 70 to 85 the risk doubles again. And from 85 to 100 the risk doubles yet again. In other words, as
Diastolic pressure rises from the ideal of 60 to the high of 110 the risk of a heart attack goes up 800 percent! Research on the figures associated with systolic pressures give the same result. When systolic pressures rise from the normal 110 to 120 to the figure of 200, the increase in risk is 800 percent. No wonder experts of the Metropolitan Life Insurance Company have declared: "... even a relatively modest elevation of blood pressure has long range effects on longevity." Not only does high blood pressure result in atherosclerosis, heart attacks, and strokes, but it is a major cause of kidney deaths. About 10 percent of sufferers from essential hypertension will ultimately develop some degree of kidney failure.

The relationship of blood pressure to the rate of first heart attacks is shown here. As the diastolic blood pressure increases from under 75 mm Hg to 105 mm Hg and over, the rate at which heart attacks occur increases almost fourfold. Figures are from the American Heart Association Pooling Project.

The adjective "essential" is put before hypertension in those 90 percent of cases where the specific cause of the high pressure cannot be ascertained. The remaining 10 percent can be traced to specific diseases such as tumors of the adrenal glands, or Bright's disease, or Cushing's syndrome, etc. In some cases when high blood pressure remains unchecked, it becomes accelerated or malignant and this can prove fatal within a few months or years. Blurring of the vision is one rapid consequence.

Ignorance About Blood Pressure Can Result in Early Death

The issue is so important that we would stress again that ignorance here can mean early death. And ignorance is so easy. If the doctors themselves for decades could speak of a normal blood pressure being a 100 plus the individual's age, it's not strange that we laymen should be even more careless and ignorant. The fact is that there are millions upon millions of people in Third-World countries whose pressure is never elevated with age, and who never develop any significant degree of atherosclerosis and whose chance of heart attack or stroke are infinitesimal. It is not, repeat not, normal to have a blood pressure that is elevated above 120 over 80. It is much better if our pressure is significantly below those figures that have been traditionally regarded as normal. Some specialists believe it would be much more accurate to suggest that only 100 to 110 over 60 to 70 should be considered normal. It is a great mistake to classify average statistics as the norm in matters of health. The fact is the average person is not very healthy and will die decades earlier than necessary.

The important question is: What causes high blood pressure? Medical science usually speaks of stress, toxic substances, such as tobacco and gasoline fumes, etc., food additives, insecticides, drugs, and diet. The last named is almost certainly the most important. About every decade researchers discover afresh that what we choose to eat is the chief villain in this murder story. Refined foods, the failure to make a major portion of the dietary consist of fresh, raw, whole foods such as fruits and salad vegetables, the popular error of consuming large amounts of packaged and canned goods – these mistakes inevitably bring a high intake of salt. The evidence is quite overwhelming that in the Third World where salt intake is low, high blood pressure does not exist for the vast majority. On the other hand, where salt intake is heavy as in northern Japan, high blood pressure is the rule – and early death!
reported such famous experiments as that of Drs. L. K. Dahl and R. A. Love who checked a large number of men for both salt intake and blood pressure. They found they could divide up the members of the study into various groups. The first group consisted of those who never added salt to their food. The second group added salt before tasting their food. The third group used salt according to taste. Results of the investigation? The first group who never added salt did not contain a single case of high blood pressure. The group that only added salt after tasting had about 7 percent of hypertensive people, but those who salted before tasting had 10 percent with abnormal blood pressure. Experiments with rats have shown that blood pressure rises proportionately to the increase of salt in the rats' diet.

**How Much Salt?**

Let it be noted that there is enough sodium in ordinary unrefined foods for human needs without ever adding any salt whatever. There have always been populations who never knew or never used salt. The American Indians, prior to the coming of the white man, were one such group and the Bedouins another. The early Eskimos were a third such group. Others include many African natives, Australian aborigines, and lesser-known races.

How much salt is needed? Opinions vary from about 1/10 of a gram up to 1 gram a day. The average person in the U.S. consumes more than twenty times the minimum amount required. Some statistics regarding the amount of sodium present in natural foods compared to the amount of sodium in the cooked product, illustrate the problem well.

**Sodium in 3½ oz. Serving**

**Fresh vs Canned (milligrams)**

<table>
<thead>
<tr>
<th>Food</th>
<th>Fresh (mg)</th>
<th>Canned (mg)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peas</td>
<td>2</td>
<td>236</td>
</tr>
<tr>
<td>Asparagus</td>
<td>4</td>
<td>410</td>
</tr>
<tr>
<td>Tomatoes</td>
<td>3</td>
<td>140</td>
</tr>
<tr>
<td>Corn</td>
<td>1</td>
<td>250</td>
</tr>
<tr>
<td>Lima Beans</td>
<td>1</td>
<td>240</td>
</tr>
<tr>
<td>Rice</td>
<td>10</td>
<td>1100 (packeted)</td>
</tr>
</tbody>
</table>

**Sodium Content of Popular Foods (milligrams)**

<table>
<thead>
<tr>
<th>Food</th>
<th>Sodium (mg)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Big Mac (1)</td>
<td>1510</td>
</tr>
<tr>
<td>Soy sauce (1 Tablespoon)</td>
<td>1320</td>
</tr>
<tr>
<td>Swanson's Fried Chicken Dinner (1)</td>
<td>1152</td>
</tr>
<tr>
<td>Campbell's Tomato Soup (10 oz.)</td>
<td>950</td>
</tr>
<tr>
<td>Ham, smoked (3 oz.)</td>
<td>636</td>
</tr>
<tr>
<td>Creamed cottage cheese (1 cup)</td>
<td>580</td>
</tr>
<tr>
<td>Kellogg's Cornflakes (4 oz.)</td>
<td>1024</td>
</tr>
<tr>
<td>Kraft Process American Cheese (3 oz.)</td>
<td>714</td>
</tr>
<tr>
<td>Potato Chips (30 chips)</td>
<td>420</td>
</tr>
<tr>
<td>Catsup (1 Tablespoon)</td>
<td>155</td>
</tr>
<tr>
<td>Mayonnaise (1 Tablespoon)</td>
<td>130</td>
</tr>
<tr>
<td>Salted peanuts (1 Tablespoon)</td>
<td>38</td>
</tr>
<tr>
<td>Rolaids (1 tablet)</td>
<td>53</td>
</tr>
<tr>
<td>Alka-Seltzer (2 tablets)</td>
<td>521</td>
</tr>
</tbody>
</table>

Normal requirement per day: 200 milligrams, or in generous terms 1/2 to 1 teaspoon of salt per day if you are a vegetarian, and less if not.

Armed with such information as this, the average person should readily be able to save himself from an early death. But the solution is not so simple. Few people have the discipline required to watch their diet as closely as is necessary. For that reason, even a very patient doctor will be lured to give a prescription rather than endeavor to educate his patient. Drugs for high blood pressure can save lives when the disease is at an advanced stage. In other cases such drugs probably do more harm than good. Their adverse side effects are many and include impotence, diabetes, acute gouty arthritis, nausea, dizziness, depression, headache, etc.

The better approach to the problem of high blood pressure is that which at first seems the hardest – discipline in eating and drinking. When excessive weight is lost, the blood pressure is almost always automatically reduced. If people would abstain from the use of processed foods and eat an abundance of fruits, vegetables, and whole grains, the problem would usually solve itself and tragedy be averted. Regular exercise also helps significantly.

Let it be understood that we are speaking in general terms for the majority of people. There is a minority who seem to be able to withstand the threat of elevated blood pressure, but it is only a minority and there are many who do not react to salt as adversely as do others. Because it takes a long time for the results of bad habits to be manifested, it would be foolish to assume that one is in the fortunate category. It is far, far better to play safe. Nevertheless, a regular checking of one's blood pressure is advisable. This need not be done at a doctor's office where, for many people, the blood pressure would show a
functional elevation. By that we mean that the psychosomatic impact of being tested in a medical office often elevates the blood pressure and thus gives a false result. It is better to take it oneself with the simple apparatus that can be inexpensively bought, or from time to time use even the machines that are found in supermarkets, airports, and other places.

However, a conclusion about one's blood pressure should not be based on one test. The fact is there are many things that can elevate one's blood pressure including excitement, exercise, food intake, etc. Usually one's blood pressure is at its best after waking in the morning. Then, as a rule, neither excitement nor food can play a part in a test. The early morning is a good time for someone who owns a kit to take a test. Never take it just after vigorous exercise or at a time of emotional excitement or immediately after eating. If the individual takes an average of many measurements, the result will be fairly accurate.

**Drugs and Hypertension**

While self-discipline is the ideal approach to this problem of elevated blood pressure, we would stress the wisdom of the use of drugs when one's blood pressure has reached an extreme height. Certainly everyone with high blood pressure should counsel with a good physician.

The problem with taking drugs to lower blood pressure in the vast majority of cases where the pressure is only moderately elevated is that the disease, for which the therapy has been invoked, will probably continue its course and the drug therapy will need to be maintained for life. Thiazide drugs have been very popular for blood pressure, but by them latent diabetes has often been transformed into clinical disease and so accentuated that previously effective doses of insulin no longer prove adequate. The same drugs increase blood uric acid levels often resulting in gouty arthritis.

About four out of five popular drugs today are associated with hypertension. High blood pressure has been a bonanza for the pharmaceutical firms. Millions of people are on drugs for their hypertension. Taking the risk of tiring the reader, it must be said again that all drugs, including anticonvulsant drugs, antihypertensive drugs, have harmful side effects. When Triparanol was introduced to inhibit cholesterol, clinical trials reported its success almost immediately. But for some patients there was a considerable loss of hair, for others there was serious skin disease, etc. The worst effects, however, were hidden ones. The drug for many people proved toxic and for some was far more harmful then high cholesterol. They showed an alarming increase in blood fats.

Over twenty years ago Dr. Jeremiah Stammler, then in charge of the Chicago Board of Health Heart-Disease-Control-Program, summed up a panel discussion at the Annual American Heart Association Convention by saying: “Methods of prevention must be safe, and no one is sure of the long-term effect of drugs. Prevention cannot be based on drugs. If the coronary disease is a product of a way of life for which diet is one factor, then use of drugs is irrational. Diet is better than drugs.”

About the same time, Dr. Irvine H. Page, speaking to a symposium of the American Heart Association, reminded the cardiologists that, "People don't like virtue, unfortunately ... and they think it's easier to buy pills .... I'm inclined not to go along with people who want to take pills to accomplish something that should be accomplished by virtue.”

**Alternatives to Drugs**

In Dr. Timothy N. Caris’ *Understanding Hypertension* published in 1985, we read the following:

> When one thinks of treatment and hypertension, drug therapy usually comes to mind. There are, however, several approaches involving changes in diet and lifestyle that may prove to be effective in lowering blood pressure without resorting to drugs.

The author then lists the following approaches: low-sodium diet, weight reduction, exercise, reducing or eliminating alcohol consumption and tobacco smoking, dietary supplements.

Obviously, a sufferer from mild hypertension should first pursue these alternative methods to drug therapy. While it is much easier to swallow something from a package or a bottle, handling the side effects of drugs is not a simple affair. About 10 million people in this country suffer from sexual impotence. A large proportion of these have the problem as a result of using drugs that relieve hypertension. We don't know how many divorces have been unnecessarily caused by drug-related impotence. Other side effects are similarly undesirable. The diuretic drugs not only remove salt from the body, but they remove other chemicals including potassium. When too much potassium is removed, muscle weakness can follow and there is also an upsetting of the heart's natural rhythms. Reserpine is another favorite drug, but it has, for its most important known side effect, severe mental depression including anxiety, despondency, and loss of appetite and often lethargy. Diarrhea and nasal stuffiness can also result from Reserpine.

For patients who take Hydralazine, headaches often have to be endured, and in some cases the headaches are continuous and incapacitating until the drug is dropped. In other instances, the headaches may cease as the treatment continues to be replaced by other side effects such as nausea, weakness, heart palpitations, and chest pain. Even arthritis-like symptoms and skin eruptions are experienced by some patients.

For those who take Alpha-Methyldopa, sleepiness is a possible side effect as well as dryness of the mouth. Even hepatitis can result, accompanied by fever. Then there is Guanethidine. Here is a drug esteemed by many physicians for its usefulness. But it can result in faintness and diarrhea and sexual dysfunction. Not impotence but backward ejaculation can result.

Every physician is familiar with instances where hypertension seems to be a matter of heredity. However, it is still a matter of much debate as to whether all those things apparently hereditary are really so. Hereditary factors may predispose many of us to diseases, but almost always it is environmental factors that trigger our actual illnesses. For example, only half of identical twins who have had parents with diabetes, themselves contract the disease. In perhaps the majority of instances of obesity, it was the life-style and customary eating habits that were handed on rather than obesity itself. Something similar may be the case with instances of hypertension that seem to have a hereditary factor.
The bottom line to be always kept in mind is that the universe is run by law. Obedience to law brings life, but disobedience brings death. "Whatsoever a man soweth, that shall he also reap" (Gal 6:7). The harvest is inevitably determined by the sowing. We reap what we sow – a man doesn't reap potatoes after sowing pumpkins. We reap more than what we sow – no one would sow a bag of wheat with the expectation of only harvesting one bag. There is a gap of time between harvesting and sowing and tragically "Because sentence against an evil work is not executed speedily, therefore the heart of the sons of men is fully set in them to do evil" (Ec 8:11). And, lastly, ignorance of the nature of the seed that we sow makes no difference in regard to the harvest. When we read that Jesus prayed, "Father, forgive them, for they know not what they do" (Lk 23:34) we should not only observe the love of the Father and the Son, the forgiving love, but we should also notice that ignorant people need forgiveness. Ignorance does not cancel the sin or the guilt. No alcoholic ever plans to run over a child playing in the street. They may not even remember having done it when they have done it. In one sense they were not responsible for the accident, but in another sense they were. And so it is with all of us. "My people are destroyed for lack of knowledge." It's true to some degree of all who have ever lived. Remember always that nature never forgives and makes no provision for extenuating circumstances, not even for ignorance or pious motives.

The Christian knows it is his or her duty to love God with all the mind as well as the heart and strength. No one can be a mature, intelligent Christian without using the mind to find out the will of God in all things that affect stewardship, service, and responsibility. It is a sin to be ignorant in the things that concern us so closely and that affect our happiness and usefulness here and hereafter. And yet it is not necessary that any of us should be a mental genius. God's great truths are simple.

Scripture has much to say about the life-style of the Christian. The nearer we can get back to the elements that constituted the life-style of our first parents, the better our health will be and the more effective our Christian witness. In this matter of high blood pressure, in the majority of instances, it is our departure from the life-style indicated by Scripture that brings this disease.

None of us meets all of the ideals that are cherished in the heart, but all of us could meet more than we do. Living close to Christ by faith, in daily contemplation of his cross, and meditation upon his Word, the indwelling Spirit will motivate us in a way that no worldling ever knows. While the Old Testament declares "For the life of the flesh is in the blood" (Lev 17:11), there is a better word in the New. Jesus said, "I am come that they might have life and that they might have it more abundantly" (Jn 10:10).

**SUMMARY**

The most important of personal statistics are your blood pressure measurements.

Only in this generation have medical men recognized the supreme importance of a low or moderate blood pressure and the great danger of high blood pressure.

When high blood pressure is linked with high cholesterol, the chances of early death are greatly multiplied.

High blood pressure is usually caused by a faulty diet that consists largely of fatty foods, refined foods, and salty foods, and is deficient in fresh, raw, unrefined food. It is impossible to eat largely of canned or packaged foods without absorbing many times the optimum amount of salt required.

Most people who wish to lower their blood pressure can do so simply by reducing weight, exercising regularly, and eating largely of fresh, unrefined foods.

The use of drugs for moderately elevated blood pressure is of dubious benefit and often productive of great harm.

The chief reason for medical prescriptions and for death is high blood pressure.

High blood pressure is a rarity in communities that do not eat refined and processed foods.

Until the 1930s many medical men thought that elevated blood pressure was a good thing.

Only after World War II did it become apparent that it was vital to solve the problem of high blood pressure.

Statistics from insurance companies have proved that – usually – the lower the blood pressure the longer the life.

Most people with high blood pressure don't know they have it. The ideal blood pressure at rest is not 120/80 but nearer to 100 to 110 over 60 to 70.

Northern Japan has had one of the highest rates of high blood pressure and strokes as a result of one of the heaviest salt intakes in the world.

Usually the more sodium ingested, the less potassium. This paves the way for ultimate heart attacks.

The best way to reduce moderately elevated blood pressure is not drugs but exercise and losing weight.

No single test of blood pressure should be regarded as reliable and accurate. Blood pressure is continually changing and only a number of tests averaged are likely to give correct figures.

Four out of five popular drugs used today are associated with high blood pressure.

All of these drugs have harmful side effects.

It is much better to change one's habits than to pursue the unnecessary use of drugs.

**REFERENCES**


2. Ibid.

The reader is referred to the following articles:


Dr. John McDougall's *A Challenging Second Opinion* contains the most readily available bibliographical data on this subject and we have drawn from that source in this listing.
CHAPTER 16
Mature Christians Are Not Pollyannas

It is healthy to think positively and optimistically unless the facts of the matter are against us. In medical affairs it pays to be skeptical.

* * * *

... in your country people are far too medically minded: they read and think too much about health and go to doctors too often! It seems to me crazy ever to have an operation unless it is either a quite trivial one or quite clearly necessary. My own doctor, who happened to be also one of my most intimate friends (he's a R.C.) says that the vast majority of illnesses are either incurable or (which is fortunately the larger class) cure themselves in due course.


* * * *

A new scientific truth doesn't triumph because it convinces its opponents and makes them see the light, but because its opponents eventually die and a new generation grows up which is familiar with it.

Max Planck, Nobel Prize winner.

* * * *

Any fool can cut a head off, but it takes a magician to put it back on.

Aleksandr Solzhenitsyn
(For head, substitute tonsils, adenoids, gall bladder, uterus, etc.)

* * * *

Be Positive, But Not Stupid!

Pollyanna, of course, was the young heroine of Eleanor H. Porter's novels. Pollyanna turned a virtue into a vice by cherishing optimism at the wrong times.

The Bible is the most realistic of books. This, of course, is why some atheists have complained about it. "Look at the terrible things recorded there," they say. Yes indeed-terrible! Because the Bible is a medical book and it must describe the disease it treats. Since the Fall, humanity has been sinful, desperately wicked, corrupt, and prone to all manner of evil. Without the grace of Christ, humans have no protection against the temptations of the evil one.

And what has this to do with the battle for health? Just this:

Never have so many people received such excellent medical care and lived longer than they do right now in the United States. We have the finest trained physicians, the most sophisticated technology, and resplendent facilities for caring for the sick.¹

But the same writer in the same book adds on a later page:

... according to the House Interstate and Foreign Commerce Oversight and Investigation Subcommittee, “Two million needless surgical procedures were performed in 1977, costing over 4 billion dollars and leading to more than 10,000 deaths.” The "needless" surgical procedures involved hysterectomies, tonsillectomies, gallbladder removals, and operations on the spine.²

Dr. Kra is not suggesting that operations are not frequently called for, urgently, in the very areas he indicates, but he is citing objective testimony to the fact that there is much unnecessary surgery, and that it often causes death.

Medical journals have made such protests from time to time. One of the most recent instances can be found in the *New England Journal of Medicine* of March 12, 1981, in an article entitled, "The Anatomy and Economics of Surgical Mishaps."

The article tells of an analysis of the experience of 815 patients admitted to Boston University Medical Center over a 5-month period. 500 medical mishaps overtook 290 patients, and 200 of these were due to medications prescribed by physicians. In financial terms the cost was at least $1.3 million; but in terms of death, 15 lives; and in terms of sorrow, nobody knows.

Dr. Kra also draws our attention to an article entitled "Drug Induced Illnesses Leading to Hospitalization" published in the *Journal of the American Medical Association*, May 1974:

... it was demonstrated that 10-18 percent of patients who were admitted to the hospital were there for bad drug reactions, with a 13 percent mortality rate ...

In the majority of cases, adverse reactions to medications cannot be predicted by the physician. No matter what medication is given, it will have some side effects ...³

Neither Doctors Nor Patients Are Infallible

Scripture teaches clearly that there is no such thing as human infallibility or human moral perfection. Error and sin dog us all – including shepherds of the flock, and those called to ministry like Luke, the beloved physician.
The Principles of Medical Ethics set forth by the American Medical Association includes these words: "A physician shall deal honestly with patients and colleagues, and strive to expose those physicians deficient in character or competence, or who engage in fraud or deception."

Even if modern doctors were of the same quality as the first twelve apostles there would be among them (in this country alone), at least 50,000 living far below their own high standards. No doubt the same is true amongst clergy, lawyers, and other professions.

If, then, as Scripture teaches, sin has tainted all situations and all people, let none be so foolish as to trust, without question, his or her health to any single person's say-so. A popular medical book, of this decade, by Dr. Isadore Rosenfeld is entitled Second Opinion, and the reason many esteem the volume is that bitter experience has indelibly impressed the lesson that no physician is infallible — and that a second or third opinion in important issues is the way of wisdom.

The implications of the scriptural teaching on the nature of reality and human nature are wide-ranging. Often we who are sick want reassurance from the physician we attend that our indisposition has validity, and to that end we expect of him or her the symbol of this validity — a drug prescription. It would be better usually to tell the doctor forthrightly: "I prefer not to take drugs unless it is quite clear that there is more to gain than to lose. If you consider my problem is self-limiting, and that without medication a few days or weeks will solve it, then please do not give me a prescription."

Again, our sinful human nature demands the necessity of our applying the Golden Rule. We are to treat the physician as we would want the physician to treat us were our situations reversed. Estimates suggest that the great majority of malpractice suits are not well grounded. Some there are who earn their living by suing doctors, lawyers, and the like. Because physicians are fallible like their patients, some of the outcomes of medical treatment will not be as expected. In some such cases malpractice suits are warranted, but probably in the great majority of cases they are not.

God never relieves us of our personal responsibility in decision making. Not even in the case of sickness are we to commit ourselves fully and unreservedly to another person's mind. No expert is as expert as we think or hope. All we know, and all the physician knows, can go in a thimble — along with a woman's finger too.

Every situation of life calls for care and prayer. Robin says doctors are often wrong. An indisposition should not send us immediately to the doctor's surgery. Most of such pass quite swiftly and would only be complicated by drug therapy. (Yet it behooves us to be intelligent, and refuse unnecessary risks when in uncertainty. Better for the physician to tell us, "It's nothing," than to hear him say, "You should have come sooner.") To some degree everyone is a fool, or his or her own doctor, by the age of forty. Remembering the power of the imagination referred to elsewhere in this volume, expect to often feel "off color" when the real cause is something as trivial as the weather, an unpleasant duty, indigestion, or worse, bad news.

Medical Intervention Always Carries Risks

The thing that is certain is this: once you set the ball of medical intervention rolling, you have no idea where the ball will stop. It's like a marriage — but sadly, 50 percent of marriages have an unhappy ending. Diagnosis, prescription, hospitalization, surgery — all are attended with mortal risks. Until the second decade of this century, according to the late Professor Lawrence J. Henderson of Harvard, a random patient taking a random ailment to a random physician had only a 50-50 chance of "benefitting from the encounter." Do not assume that the mere passage of years has wiped out all the element of risk.

It is only a century since patients were regularly bled. Now we do almost the opposite. Less than a century ago patients were still being given strychnine as a stimulant and tonic for those who were run-down. One noted medical authority said the treatment was "like kicking a dying horse when he is down."

Quinine was valuable for treating malaria but it damaged and sometimes destroyed our chief means of protection against infectious diseases — the white blood cells. Then early this century coal-tar medicines were "in" as pain relievers, for use against headaches and fevers. Today, physicians would not dream of prescribing (once popular) acetanilide and amidopyrine, or even phenacetin — which was used widely for about 100 years in this country, and until recently in some European countries.

Another group of pain relievers which followed the coal-tar drugs contained cinchophen, or some derivative. These led to cirrhosis of the liver, and death. In 1903, barbital became widely used as a sleep producer and tranquilizer. More than forty products under a variety of names embodied this poison and flourished for years.

The chief cause of Cushing's Syndrome (moon-faced victims) was the free use of corticosteroids. Symptoms included water retention, bone fragility, and total inability to deal with any measure of shock.

Even drugs which have a valid place can often exact more of a price than benefits rendered. According to one investigator, Dr. Sidney Wolfe, the misuse of antibiotics in hospitals each year produces 55,000 life-threatening adverse reactions. These reactions result in 30,000 deaths — deaths of patients whose condition is otherwise non terminal.

Here in the USA, 1/7 of hospital days are needed for the care of drug toxicity, at an incalculable cost in pain and sorrow; and a financial cost of billions of dollars annually. One estimate of the total loss of life among hospital patients from drugs alone is one-hundred and thirty thousand.

Not only is therapy a very risky business, but diagnosis is also. The doctor is not necessarily to blame for problems that are more complex than might first appear. A well-known study regarding medical opinion on the necessity of tonsillectomies for 1,000 school children, illustrates the difficulties of diagnosis. First of all, after examination, 611 of this group lost their tonsils. Then the remainder were examined by another group of doctors and 174 more were selected for the operation. This left 215 sets of "normal" tonsils. But they proved too much for the third group of investigators, and another 99 were whipped out. Once more into the breach came the physicians so eager to help, and half the remnant remaining lost the precious lymphoid tissue.

The time will undoubtedly come when the number of hysterectomies will be greatly reduced, as is now the case with tonsillectomies. The same is true regarding the gall-bladder avalanche of over 1,000 removals a day in this present decade.
The human body is the creation of God, and the purchase of the blood of Christ. It is infinitely precious, and each of us is a steward of this "temple of the Holy Spirit" (1 Cor 6:19). It is not a sewer for unnecessary poisonous chemicals, nor a means of deriving wealth for a minority of unscrupulous professionals. Only as Christians perceive more clearly the importance of preventive medicine, and help to educate the nation accordingly, can the torrent of unnecessary sorrow and death be staunched.

Don't Wait for the Red Light

Christians have more than a head start in matters of health. If they will take seriously the principles set forth in Scripture they can reduce their chances of premature death by about 80 percent. But all of us find out many truths the hard way.

Take, for example, that long unsuspected killer — asbestos. By the end of this century it will have claimed the greater part of a million lives. But before the days of Christ, Pliny the Elder, a naturalist, mentioned casually in his reports that slaves weaving asbestos into cloth contracted diseases of the lungs. Not until the 1950s and 60s did the damning evidence emerge to confirm what Pliny suspected. By then hundreds of thousands of people in this country had come into close contact with asbestos fibers, and millions into some association with it.

Stilbestrol was recommended by doctors and medical journals over a period of thirty years. Then suddenly the truth emerged that the masses of women who had taken the drug had been unknowingly placing their female offspring in danger of cancer. Phenacetin came into use about 1887. Only in the 1950s did suspicion arise that phenacetin might be responsible for kidney damage and death. Here in the U.S., even in 1980, it was still legally on sale, though certain European countries, such as Sweden, had banned it decades before.

You remember the painters of luminous watch dials. In the 1930s for the first time it was learned that contact with radium could promote internal deadly disease. Then in 1944 a casual reader of the medical journals noticed that radiologists had a much greater incidence of leukemia than other doctors.

The list can be indefinitely extended. Man has used for medicine, or other intimate purposes, things that are deadly poisons, and it takes decades, even centuries, for the truth of their real nature to emerge. Hippocrates had advised "let food be your only medicine, and medicine your only food," but humanity has always looked for a more spectacular way. Our Lord's repudiation of a drug on the cross is meant to be a red light to believers against unnecessary usage of potent mixtures which were never intended for regular human use.

We think you are now prepared for the warnings regarding certain forms of drug usage in the following chapters, but if any doubts remain read carefully the chapter "The Harm That Medicine Does – Latroepidemics" in Dr. Eugene D. Robins outstanding book Medical Care Can Be Dangerous to Your Health.

SUMMARY

Fools often suffer as much as the wicked, and the person who is not skeptical and cautious regarding current medical traditions and practices is a fool and will certainly suffer.

There are millions of unnecessary surgeries every year with their potential for loss, pain, and death.

Seeking medical intervention unnecessarily can result in erroneous diagnosis and therapy with all their attendant dangers.

Those who swallow medical drugs unaware of the risks involved may one day be responsible for their own premature death.

Drugs have an appropriate place in treatment, but it is not the preeminent place usually given them.

REFERENCES

2. Ibid., p. 24
3. Ibid., p. 200
4. Cured to Death, p. 103.
5. Overall, your chances of getting an infection in the hospital are about one in twenty. That's a conservative estimate. Half of the infections in hospitals are caused by contaminated medical devices such as catheters and intravenous equipment. Before the explosion in the use of these devices around 1965, device-related infections were virtually nonexistent. About 15,000 people die from hospital-acquired infections every year. Robert S. Mendelsohn, M.D., Confessions of a Medical Heretic, p. 70.

Conservative estimates — such as that made by a congressional subcommittee — say that about 2.4 million operations performed every year are unnecessary, and that these operations cost $4 billion and 12,000 lives, or five percent of the quarter million deaths following or during surgery each year. The independent Health Research Group say the number of unnecessary operations is more than 3 million. And various studies have put the number of useless operations between eleven and thirty percent. Ibid., p. 49.

The formation of committees to review tissue removed in operations has resulted in some telling statistics. In one case, 262 appendectomies were performed the year before a tissue committee began overseeing surgery. During the first year of the committee's review, the number dropped to 178. Within a few years, the number dropped to 62. The percentage of normal appendices removed fell fifty-five percent. In another hospital, the number of appendectomies was slashed by two-thirds after a tissue committee went to work.
The victims of a lot of needless surgery are children. Tonsillectomy is one of the most common surgical procedures in the United States. Half of all pediatric surgery is for the removal of tonsils. About a million are done every year. Yet the operation has never been demonstrated to do very much good. Ibid., p. 50.

Parents are lulled into believing that the operation "can't do any harm." Though physical complications are rare, they're not altogether non-existent. Mortality ranges in different surveys from one in 3,000 to one in 10,000. Emotional complications abound. Getting to eat all the ice cream you want doesn't make up for the justified fear a child experiences that his parents and his doctor are ganging up on him. A lot of children show marked changes for the worse in their behavior after the operation. They're more depressed, pessimistic, afraid, and generally awkward in the family. Who can blame them? They can sense, and unfortunately be seriously affected by, a patently absurd — though dangerous — situation.

Another operation steadily climbing towards the million-a-year mark is the hysterectomy. The National Center for Health Statistics estimated that 690,000 women had their uteruses removed in 1973, which results in a rate of 647.7 per 100,000 females. Besides the fact that this is a higher rate than for any other operation, if the rate continued, it would mean that half of all women would lose their uterus by age 65! That's if the rate holds steady. Actually, it's growing. In 1975, 808,000 hysterectomies were performed.

Very few of them were necessary. In six New York hospitals, forty-three percent of the hysterectomies reviewed were found to be unjustified. Women with abnormal bleeding from the uterus and abnormally heavy menstrual blood flow were given hysterectomies even though other treatments — or no treatment at all — would have most likely worked just as well. Ibid., p. 51.

... if you read the list of indications for Valium, and then read the list of side effects, you'll find that the lists are more or less interchangeable! Under the indications you'll find: anxiety, fatigue, depression, acute agitation, tremors, hallucinations, skeletal muscle spasms. And under the side effects: anxiety, fatigue, depression, acute hyper-excited states, tremors, hallucinations, increased muscle spasticity! Ibid., p. 42.

... startlingly little justification could be found in claims records for a large majority of the tonsil and adenoid operations performed. Although all the possible implications of this finding remain uncertain, the finding certainly does not detract from the position that high surgical rates reflect low standards of practice.

Tonsillectomy and adenoidectomy are performed in some children without proper justification, whereas others who should receive the operation — say, because of alveolar hypoventilation — for one reason or another fail to receive it. In my view the former group vastly outnumbers the latter.3 [3. Paradise JL: More on T. & A. Pediatrics 59:641-642, 1977.] High surgical rates may not invariably imply low standards of practice just as slow rates may not guarantee that standards are high. However, where high rates exist they should certainly receive critical scrutiny. New Eng J Med, Jan. 5, 1978, Vol. 298 No.1, p. 58.
CHAPTER 17
Dopey the Dwarf (Part One)

Abuse never cancels use, but it is sadly true that drug therapy is the most abused therapy in the realm of medicine. Ninety percent of drugs, both prescription and nonprescription, would be better poured down the sink than permitted to enter the human body. Even the right drug administered at the right time, in the right way, by a skilled physician, can do harm. While certain drugs, such as antibiotics, insulin, B-12, etc., have improved life in quality and quantity for millions, it is also true that for a much larger number drugs have ended or shortened life.

The more frequently antibiotics are used, the faster the resistant strains emerge. After only forty years of antibiotic use, the levels of resistant bacteria have risen dramatically. More than half of the staphylococcal bacteria, including S. aureus which causes boils and toxic shock syndrome, have developed resistance to antibiotics that once controlled them. Some strains that cause gonorrhea and meningitis have become resistant, and the first few cases of resistant pneumococcal infections have been reported. Hospitals, where antibiotic use is extensive, are infested with a variety of dangerous, highly resistant bacteria.


... Today, hospital and drugstore sales of prescriptions amount to over $20 billion. And Americans shell out up to $9 billion on nonprescription drugs "with an estimated 40% of the U.S. population using an OTC product in any given 48 hours."

Now that is one big pile of pills! Keep in mind that most of these medications can't cure anything. At best they can only temporarily relieve symptoms ...

And there is almost always a price to be paid for such relief. The FDA estimates that there are over six million drug-induced adverse reactions each year in this country.

Simply stated, too many drugs are prescribed in our pill-popping society.

Joe Graedon, The People's Pharmacy, p. 3.

The Goddess of Health

We have all heard of hygiene, but not everybody knows about Hygeia. She was the lovely goddess who cared for the health of Athens. Observe, we did not say that she treated the sick. Her task was to prevent the advent of sickness. She was an emanation of Athena, the goddess of reason, and symbolized the belief that all could remain well if they lived according to reason. In other words, mens sana in corpore sano ["a sound mind in a sound body"] was her ideal. But people then, as now, preferred a "quick fix." It was much easier to depend on healers than to discipline oneself into living wisely. So even before Hygeia we have Asclepius, the first physician. He did not rise to fame by admonishing patients as to the right habits of living, but instead he applied the curative virtues of plants, and wielded the knife. In view of the fact that none of us have done all things well, we are glad for the existence of Asclepius. We should prefer, however, that as well as bringing his healing skills, he also embody the wisdom of Hippocrates, who in many ways modeled his practice on Hygeia.

But the stories of Hygeia and Asclepius symbolize the two different views of medicine which have struggled for the possession of humanity's mind and body for millennia. Truly they are complementary, but wherever one does not give the other its rightful place, trouble proceeds. In this pharmacological age we are modeling more on Asclepius, and doing so at great risk. We have forgotten that while Scripture countenances diagnostic and curative medicine, its chief emphasis is on prevention. Running contrary to Scripture is our human weakness, and to understand the popularity of Dopey the Dwarf, drug medication, we need to understand the warp in our being that predisposes us to medical crutches that often do more harm than good.

The Twist in Our Nature

One of the signs of our fallen estate is our desire to escape warranted judgment. This is illustrated from the beginning of human history. Our first glimpse of Adam after the Fall is his flight from punishment, and his first words are, "I was afraid and hid myself."

Human nature has not changed. We know intuitively that evil must be punished. Even errors without moral content usually bring adverse reactions. Cause and effect linkage is innately recognized by all of us, yet, despite this, we strive to break the connection between sin and its fruitage. Excuse-making, the transference of blame to another, the harboring of illusions that our motives are entirely pure despite our wrong actions — all these are symptomatic of our flight from responsibility.

TV advertising would have us believe that there is no ill beneath the sun which is not susceptible to the marvels of modern technology. Ambitions may be realized, skills acquired, healings accomplished almost overnight by means of the "quick fix" being advertised on the screen. (Adam's "quick fix" in Eden was the fig-leaf garment.)

All false religions in the world have offered the "quick fix." Confess, sacrifice, and presto — your fault and all its fruit are gone. Sometimes confession is enough. Here the counterfeit is so close to the miracle of the true, it is no wonder millions have been deceived. Scripture does offer divine absolution of sin — for the asking — but it never guarantees the cancellation of the temporal consequences of a wrong course of action. If one cuts off one's hand, repentance will not put it on again. The barrier between the sinner and the Savior is instantaneously removed upon penitence and confession, but usually there is restitution required, and physical penalties still have to be paid. David's experience illustrates the point: after his sin with Bathsheba, although he confessed and was forgiven, he still lost four sons.
The same lesson is found in the world of nature as in the realm of grace. An alcoholic forsakes his alcohol under the impulse of faith in the gospel. He is forgiven. He has eternal life. But he also may have cirrhosis of the liver. The chain-smoker reforms. But he may have cancer of the lung. The universe is controlled by law, and obedience is the condition for health and happiness. Dependence upon drugs to cancel out our vices ignores these truths.

While properly selected drugs for purposes of crisis intervention, correctly used, are a godsend, indiscriminate use of the 28,000 items claiming to be chemical cures is a curse. And a very popular curse. So much so that over a million and a half people a year in this country alone are hospitalized as a result of adverse drug reactions. One hundred and thirty thousand funerals follow.

The cry immediately arises: But do we not have drugs to thank for the vast reduction of infectious diseases? That question has been answered many times by many researchers, and the answer is No, as we have shown elsewhere in this book.

This is no plea for the fads and fancies of alternative medicine.

Rather, in the recent words of a doctor of psychopharmacology:

> Our attitude may be stated thus: that properly tested drugs correctly applied under skilled supervision, can benefit humanity. We would argue with the drug industry, the medical establishment and the consumer, on the questions of emphasis and scale.¹

Every child diabetic who grows to maturity is a tribute to drug therapy at its best. Likewise, all living people who once suffered from pernicious anemia.

**Thalidomide and Company**

But why should we caution against too easy acceptance of drugs? Do you remember thalidomide? Sold in forty-six countries, it yielded 8,000 deformed babies back in the 1960s. Do you know Chloromycetin, or to use its chemical name chloramphenicol? It caused approximately 10,000 deaths from aplastic anemia in Japan. After repeated tragedies brought about legislation against the unlimited use of chloramphenicol, the drug was then exported to Asian countries such as Taiwan, where the restrictions did not exist.

Remember phenacetin? This drug was sold for decades in the U.S. and throughout the world until, in the 1950s, it was found to be responsible for large numbers of deaths from kidney damage. In 1961 phenacetin was withdrawn from sale in Sweden, but the U.S. has taken decades longer. In 1980 Lilly's best-selling Darvon compound with phenacetin was a financial winner in the U.S. This despite the well-known fact that analgesic abuse accounts for approximately 12 percent of kidney-failure cases, with phenacetin the chief culprit.²

Similarly, paracetamol contributes to kidney damage, and is often used in suicide attempts. Sympathomimetics, found in over-the-counter remedies, including asthma medicines, eye drops, hemorrhoid preparations, diet pills, and cold treatments, constrict small blood vessels, and lead to increased blood pressure. This can be dangerous for that large company who have hypertension or heart disease. Antihistamines are frequently given to induce sleep, but overdoses can cause convulsions ... and so on. The fact is: many drugs cause serious health damage, and all drugs are potentially dangerous. Harrison's well-known dictum is, "Every drug has a price-tag attached."

Which is not to say that drugs have no place. Abuse never cancels use. Human ignorance and folly is often the root cause of the trouble rather than the medication. But should not Christians become intelligent in such practical matters, which can affect so greatly their capacity for service?

Let it be remembered that drug manufacturers are not bishops. They are businessmen. And they are the most skilled advertisers (or should we say propagandists?) in the world. Yearly, about $20,000 million is spent on drug advertising alone.

Advertising where? Among other places, in reputable medical journals, which would find it hard to survive financially without the patronage of the drug industry. JAMA, for example, receives about $7 million a year from drug advertising. Similarly, university researchers are often financed by the same sources. How can there be impartiality under such conditions? The fact is, leaders of medicine, uninfluenced by the drug companies, are confessing that modern medicine is helpless in the face of the majority of the chronic diseases, our modern killers. For example, despite claims to the contrary, there has been no progress towards curing the chief cancers.

Platitudes are notoriously ignored. Yet it should not require much intelligence to see how much better it is in terms of health, comfort, joy, manpower, and finance, to give priority to preventive, rather than curative, medicine. Traditional methods have been likened to the attempt to change the temperature of a room by chilling the thermometer.

**No New Complaint**

Mankind is not only notorious for not being able to see the nose on its face, but also for its lethargy in changing even when the need for change is urgent. Complaints made today, by researchers about modern medical practice, keep sounding the same, even when the need for change is urgent. Complaints made today, by researchers about modern medical practice, keep sounding the same notes. Volumes published nearly twenty years ago said practically the same things as today's works on this subject. For example, in Selig Greenburg's book *The Quality of Mercy* (introduced by Dr. R. H. Ebert, then Dean of Harvard Medical School), we read the following critique of drug medication:

> The stark reality, according to expert opinion, is that the explosive proliferation of drugs – there are now about 21,000 different drug products in the American marketplace – has led to their excessive and often promiscuous use, that doctors are confused and misled by the flood of new preparations and their gaudy promotion, that there is widespread prescribing of new medications without sufficient knowledge of their side effects and long-range properties, that premature marketing of pharmaceuticals on the basis of skimpy investigation is common, that there is unnecessary and disingenuous duplication of products, that drugs are now frequently marketed in the same atmosphere that produces a rapid turnover in automobile models and women's fashions, that beguiling drug advertising has to a
substantial degree replaced disinterested formal postgraduate medical education, and that legal controls on the manufacture and distribution of medications are grossly inadequate.¹

Also:

Critics of the prevailing system argue that the heavy volume of pharmaceutical advertising carried in the medical journals is detrimental to the public interest not only because it raises the cost of drugs but also because it warps professional integrity, contributes to the dissemination of misleading information about the advantages of many medications, obscures the point that drugs should be evaluated on the basis of their costs and benefits, and blemishes the dignity of medicine when it becomes a party to the use of Madison Avenue gimmicks to promote agents which must sustain or comfort human life.²

In the 1983 publication Cured to Death, which has been called a "thorough examination of the international drug industry and the uses and abuses of prescriptive drugs," authors Arabella Melville, doctor of psychopharmacology, and Colin Johnson, medical writer, set forth practically the same criticisms as the Greenberg study.

They sound these warnings:

Drug monitoring is not considered important ... The regulatory agencies set up to provide protection lack teeth.

Under the aegis of universal chemotherapy, medicine is no longer practiced: it is administered.

Drug-induced disease leads to many deaths. In both the United States and Britain it has been calculated that more people are killed each year by prescribed drugs than by accidents on the roads. The figures for the maimed and injured may be proportionately higher. There is no reason to believe that this level of casualties does not occur in every country where pharmaceutical products are widely used.

Reliance on drugs has not provided any real answers, let alone easy ones. It has merely created another impossible situation for the doctor. Every year brings a new crop of drugs which he is taught about by the self-interested drug companies. If he is to prescribe with any appropriate degree of care he must keep up to date. With perhaps 25,000 drugs in various forms, simply knowing what is available may be impossible. When you add to this the rate at which information is produced, it can be seen that the attempt is hopeless. The British Monthly Index of Medical Specialties (MIMS), in November 1980, noted 80 deleted products; 43 additional forms of existing drugs; 41 deleted forms; 47 changes in dosage; 26 changes in therapeutic indications; 21 changes in warnings on special precautions; and 69 new products.³

We recommend this book to every reader, not for inspirational, but for protective reading.

It is not strange that those in control of marketing for the drug companies, being businessmen rather than bishops, use some methods ethically questionable. Even the manner in which the authoritative reference manual on drugs (supplied free to doctors) is set out favors the financial health of drug companies before the physical health of patients. If a physician has begun by diagnosing the medical condition of a patient, and then seeks from this reference work to find appropriate treatment, he will soon be bewildered. Each drug is listed in an alphabetical sequence by the names of manufacturing companies, and then the brand names themselves. The doctor is thereby forced to master brand names rather than generic products which are cheaper though qualitatively as good in most cases.

In drug advertisements, in medical journals, the commercial message is set forth in huge lettering, while the factual information comes only in minute type. Often claims made for the drug are validated by reference to articles published in medical journals. The physician readers may assume that the journals alluded to are of impeccable quality, but often they are journals which charge huge fees for printing articles prompted by the pharmaceutical companies. For example, The Journal of International Medical Research last decade was charging eighty-five pounds (sterling) per page for printing scientific papers.

In addition to such tactics, every doctor is well aware of the gimmicks, blandishments and fringe benefits continually offered by the drug companies as they endeavor to "buy" the doctor's promotion of their products. Even ten years ago the drug companies were spending nearly $2,000 million a year in advertising – enough to send every American doctor back to medical school for refresher courses.

While over 100 million people a year buy tranquilizing drugs, there is not one customer in a thousand who is initially aware of exposure to the risk of addiction. This is only one example of general consumer ignorance. Here again, what we don't know CAN hurt us, even kill us. How few of the millions placed on drugs for hypertension know that for the vast majority with only moderate elevations in pressure there are much better methods of being helped with much less risk. Most could solve their problem by reducing weight and lessening salt intake – a course surely to be preferred to the danger of impotence, lessened drive, etc. How many consumers know that drug companies delight in finding and labeling supposed "ills" that require their products despite the fact that, in the majority of instances such ills are self-limiting and self-correcting, and only harmed by drug therapy. Consider, for example, bed-wetting – now dignified by the term enuresis. Drugs do not cure the problem, but time usually does. Here again nature heals, but the contemporary practitioner using drugs gets the credit even while slowing the cure. We laughed at Dopey the Dwarf when we saw him on the movie screen. Actually we were laughing at ourselves.

**SUMMARY**

Human nature loves the "quick fix" though all such are dangerous. The tendency of modern medicine is to offer what the public wants – the "quick fix." Properly tested drugs correctly applied under skilled supervision can benefit humanity. But the majority of drug usage is not in this category.

Medicine has a history of drugs once celebrated but then dismissed as causes of death or unnecessary suffering. Scores of thousands of people die unnecessarily every year because of the wrong use of drugs.
Over 100 million people in the Western world each year buy tranquilizing drugs. The majority of them are unaware of the real risk of addiction they thereby take.

REFERENCES
CHAPTER 17
Dopey the Dwarf (Part Two)
Adequately tested drugs properly applied can benefit people in crisis, but Mr. and Mrs. Average American are drug junkies. From childhood till old age and death they consume chemicals which ultimately react viciously. Most of our 28,000 drugs are of very questionable usefulness.

* * * *

... adverse reactions aren't particularly unusual. As many as six million people suffer adverse drug reactions (ADRs) every year (“Statement by Patricia Roberts Harris,” press release, Dept. of Health and Human Services, Sep. 10, 1980). And one authority says, "We can conjecture the range of 60,000 to 140,000 ADR deaths to be probably extremely conservative" (Robert B. Tally and Marc F. Laventurier, "Drug-induced Illness," JAMA 229:1043, 1974).

Joe Graedon, The People's Pharmacy, p. 32.

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"Probably the single most frequent cause of reversible dementia in people 65 years old or older is the side effect of medication, especially of multiple medication," Eisdorfer says. "Older people typically have multiple illnesses and often multiple physicians, and the tracking mechanism for the aggregate of drugs that a given patient will have has simply not been perfected."

JAMA, March 8, 1985, p. 1370.

* * * *

OLD LABORATORY DITTY
We often think of Willie
Alas he is no more,
For what he thought was H_2O
Was H_2SO_4.

* * * *

Mrs. America is a Junky
Everybody knows Dopey – Walt Disney's creation and member of the seven dwarfs. He is associated with that heroine of beauty, purity, and simplicity – Snow White. But the name Dopey also applies to Mr. & Mrs. Average American at some part of their lifetime, often over several decades.

When courageous Betty Ford was hospitalized in 1978 for the effects of excessive drugs and alcohol, she dramatized the type of drug dependency that affects multitudes. Her problems began with prescription drugs given her for physical ills. Their use became a habit and the habit became a dependency. Alcohol came in as an anodyne. According to the National Institute on Drug Abuse, there are approximately 1 to 2 million women who are abusers rather than users of drugs.

On one occasion, the assistant head of the vice squad of the Des Moines police department asserted that the typical upper-class-income housewife, Mrs. America, was really a junky. Does she not drink several cups of coffee in the morning just to get started, then take a Benzedrine (or equivalent) in the hope that it will help her lose weight? Does she not smoke several cigarettes while driving the children to school? And in the afternoon, knowing that soon she'll have to face the kids once more, does she not often take tranquilizers to calm her down? May she not have several martinis with her husband before dinner? Do they not together watch the "boob tube" with abundant beer beside them to further dull the need of analysis? Then before sleep there will probably be a barbiturate.

Before we proceed further, it should be stressed that it seems to many researchers that alcohol addiction is far worse in this country than is the use of illicit drugs. About 78 percent of men, and over 60 percent of women, together spend nearly 20 billion dollars yearly on alcohol. That's twice as much as is spent on all the welfare programs of the country and religion also. The result? Annually there are 25,000 alcohol-related deaths on the highway, about 30,000 deaths from cirrhosis of the liver, etc., and approximately 20 million problem drinkers, half of whom, at least, are alcoholics. Now we have also learned that women who are moderate drinkers increase their chances of breast cancer by at least 60 percent.

While news reports have focused on the use of illicit narcotics, more damage is undoubtedly done by the use of legitimate drugs including those found in tobacco, alcoholic drinks, over-the-counter, and prescription drugs. Everybody likes a "quick fix," for few understand the nature of sowing and reaping. Everybody wants to reap the harvest of gain without the effort and pain of sowing. All like to think that there is a pill for every problem, and our TV advertising supports that illusion. Thus there are about 20 billion aspirin pills consumed yearly in the USA, which is about 80 for each man, woman and child – and aspirin is only one of the pain killers.

Approximately 3,000 people die from sleeping pill overdoses every year, but many times that number perish from drugs wrongly prescribed or administered. What salvation from unnecessary pain, sorrow, and death could be experienced by millions, if they understood the significance of that brief record on the cross: when Christ was offered a potent drug, he refused it! (Note with care that it is the lavish, indiscriminate use of drugs against which we protest, not the legitimate, careful use which includes the alleviation of suffering. For example, the tremendous improvement in the care of the mentally ill by drug therapy is a matter for thanksgiving.)
According to Scripture, God made man upright; but humanity has sought out many inventions. That certainly applies to the over 28,000 prescription drugs that have flooded the twentieth-century market. Just for the treatment of the common cold there are non-prescription products that run into hundreds, and not one of them can cure, prevent, or even shorten the course of a cold. Thoughtless people seek an easy solution to the ills created by their habits, and a multitude of smart business people are there to meet their irrational demands. Let it be said quite emphatically: Ninety percent of drugs used are not only unnecessary but harmful to the consumer. Tragically, Dr. William Osler's counsel to physicians long ago has been unheeded: "Let the physician educate the masses against the taking of medicine." Dr. Denis Burkitt agrees when he says, "Ninety percent of all drugs could be poured down the sink and it wouldn't make any difference." In earlier years, Oliver Wendell Holmes and Thomas Edison said much the same thing.

Having made such bold assertions, let us now enter the necessary caveat. Adequately tested drugs, when properly applied under skilled supervision, can benefit people in crisis, and save innumerable lives. We insist, however, that such cases only represent, at the most, a tiny percentage of modern drug consumption. There are drugs that provide effective therapy for conditions once fatal, there are vaccines that eradicate certain infectious diseases. Analgesics, and anesthetics, can be godsend used at the right time in the right amount by the right person. But we repeat, all of these together constitute less than 10 percent of drug usage.

In no other situation is it as clear that the layman is destroyed for lack of knowledge. He thinks the drugs are good, that the person prescribing them knows all about them, and that the only sensible mode of procedure is to take them. What he doesn't know is that all drugs, whatever their virtues, are inherently dangerous. What he forgets is that drugs—not just one or two, but many—have proved so baleful in result that they have been subsequently outlawed.

According to William Schnaffner, Wayne Ray, and Charles Federspiel of Vanderbilt University almost all prescriptions of chloromycetin are unjustified. Yet, in a single recent year, over 248,000 prescriptions for it were issued.1 Clofibrate, a cholesterol reducing drug, is now known to have serious and sometimes fatal side effects. It increases the risk of death from liver, gallbladder, and intestinal disease. In 1977 Ralph Nader's Raiders estimated clofibrate sales to be 30 million. Darvon, of which over 20 billion doses have been prescribed in the past twenty-one years is, according to some, the nation's "deadliest prescription drug."2 It was implicated in 590 deaths in 1977 according to the Justice Department's Drug Abuse Warning Network.

Most laypeople don't realize that drug companies are the highest paid professionals in the world. They are presided over, as we have said, not by bishops but by businessmen. Their great intention is to make profits. To that end they spend more than $2,000 million per year in advertising alone. Much of this goes to court physicians who, because of limited training in pharmacology, are dependent on the biased words of retail agents from drug companies. The drug companies spend about $5,000 targeting each physician in the U.S. in order to get the doctor's support.

Ninety Percent of Physician Consultations Are Unnecessary

It should never be forgotten that about 90 percent of primary care consultations are actually not about treatable medical problems. They concern functional or psychosomatic problems which are self-limiting. Yet in countries of the Western world from 75 to nearly 100 percent of all such consultations end with a drug prescription. The layman is as much to blame for this as the doctor, as he feels cheated or embarrassed if he leaves the physician's consulting room without such a medical certificate proving the seriousness of his problem. Who cares that as many as 28 percent of patients suffer adverse reactions to their medications? Who cares that more people are killed each year in the USA by prescribed drugs than by road accidents? Who cares that "the annual cost of adverse drug reaction in the USA is well in excess of one billion dollars."3 Who cares that "the pharmaceutical explosion has not resulted in longer and healthier lives."4 Who cares that "while some of these drugs can be used to combat life-threatening disease, this is rare, and in the vast majority of cases they are not essential; sometimes they are totally unnecessary, and frequently they are possibly harmful."5

Antibiotics have been a godsend in a myriad of instances. But all drug therapy is a two-edged sword. Note these comments from the well-known guide issued by the Editors of Consumer Reports books.

One study completed several years ago showed that 90 percent of penicillin usage was inappropriate. It has been estimated that 50 percent of all patients who see their doctor for the common cold receive an antibiotic. Since this is a viral illness the drug is useless. Surveys of the use of antibiotics in hospitals reveal that 60 percent of the patients receive either an incorrect antibiotic, or the wrong dosage, or a drug when none is required.

... It should be understood that calamities from the use of antibiotics are rarely in proportion to the enormous amounts of these potent drugs being administered to patients. But the potential hazards, so little touched on generally, need greater emphasis.

In time, certain bacteria become resistant to antibiotics. Because of the widespread use of antibiotics that destroy Gram-positive bacteria, Gram-negative types are assuming increasing clinical importance. At least one researcher has estimated that Gram-negative bacteria cause serious blood serum infections in about 1 percent of patients in hospitals and result in the death of about 100,000 Americans each year.

It has been well established that the increase in strains of bacteria resistant to a particular antibiotic correlates directly with inadequate dosage and inappropriate use.5

Ivan Illich views the matter at its worst:

Every six hours, from 50 to 80 percent of adults in the United States and the United Kingdom swallow a medically prescribed chemical. Some take the wrong drug; others get an old or a contaminated batch, and others a counterfeit; others take several drugs in dangerous combinations; and still others receive injections with improperly sterilized syringes. Some drugs are addictive, others mutilating, and others mutagenic, although perhaps only in combination with food coloring or insecticides. In some patients, antibiotics alter the normal bacterial flora and induce a
superinfection, permitting more resistant organisms to proliferate and invade the host. Other drugs contribute to the breeding of drug-resistant strains of bacteria. Subtle kinds of poisoning thus have spread even faster than the bewildering variety and ubiquity of nostrums.

Today multitudes, particularly women, suffer from candidiasis, a yeast infection. This frequently is a result of antibiotic therapy. It can be the cause of all sorts of disturbing symptoms over a period of years. Most are ignorant of the fact that antibiotics kill indiscriminately, the good bacteria as well as the bad. Good bacteria in the vagina, gut, and respiratory tract, keep down the excessive development of fungi which otherwise would thrive there. But after antibiotics are heavily used, that restraint no longer operates, or at least, does not operate as well as it should. Multitudes have allergic reactions to drugs, and these cannot be predicted in advance as a rule. Sometimes such reactions are fatal. No wonder that wise physicians are hesitant to prescribe, and seek first other means of therapy.

Some extreme reactions to drugs are often classified by the terms teratogenesis, which literally means the production of monsters; mutagenesis, which is damage to genetic material that can cause defects that will be passed on for generations; and carcinogenesis, which means the induction of cancer. One reason such results are not rapidly curtailed by the withdrawal of the causative drugs is that there is always a considerable delay between exposure to the drug and the manifestation of disease. That's particularly true about carcinogenic drugs. It's only recently that we have become to suspect that reserpine (Diazepam), used widely once for the control of high blood pressure, also causes breast cancer.

Lesser untold results frequently bring much unhappiness. As already indicated, about 43 percent of men treated by drugs for high blood pressure become impotent, more than double the number of cases that would result from elevated blood pressure were drug therapy not evoked. Impotence is a frequent cause of divorce. Other drugs used for hypertension, diuretics, cause gout and diabetes in susceptible people. There is literally no end to the symptoms of adverse drug reaction. It takes hundreds of pages in a physician's pharmacopoeia to list them, and we have just begun to discover the almost unlimited range of ill effects of drugs. The whole of the nineteenth century only yielded about half a dozen drugs that were thought of as universally useful, but today we have about 28,000 such substances due to the proliferation of drug companies. Dopey the dwarf has been cloned!

SUMMARY

The typical upper-class-income housewife, Mrs. America, is really a junky.

The chief drug problem in this country is not anyone of the illicit drugs but alcohol.

About 20 billion aspirin pills are consumed yearly in the USA. Approximately 3,000 people die from sleeping pill overdoses every year.

According to Dr. Denis Burkitt, 90 percent of drugs could be poured down the sink with advantage.

More than a quarter of patients suffer adverse reactions to their medications.

One reason physicians give prescriptions so freely is that the patient demands it in most cases.

The whole nineteenth century yielded only about half a dozen drugs thought of as universally useful. But today we have about 28,000, most of very questionable usefulness.

REFERENCES

2. Ibid., p. 8.
3. Ibid., p. 7.
4. Ibid., p. 8.
5. Ibid., p. 11.
7. Medical Nemesis, p. 28.

The reader is referred to the following articles cited by Illich in support of his positions:


"Every year a million people – that is, 3 to 5 percent of all hospital admissions – are admitted primarily because of negative reaction to drugs." Nicholas Wade, "Drug regulation: FDA Replies to Charges by Economists and Industry," Science 179 (1973): 775ff.
CHAPTER 17
Dopey the Dwarf (Part Three)

Many researchers think that the widespread availability of medications does more harm than good. About 1½ to 2 million people are admitted to hospitals annually because of adverse reactions to drugs, and approximately 130,000 die in the hospital for the same reason.

* * *
The long-term results of drug therapy over many decades remain unknown. Some studies raise questions about risks associated with drug therapy.

* * *

... The high rate of marital disharmony, suicide, depression, and chemical dependency among physicians ... Personal health habits ... strongly influence physicians' practice in counseling patients about health habits.


* * *

Use, Misuse, and Abuse
Antibiotics have saved innumerable lives in our generation. The trouble is that all antibiotics are subject to overuse and misuse, and the evidence is now abundant that the microbial world is in some respects smarter than humanity. When penicillin first began to be used, almost all staphylococcal infections responded favorably, but now about 90 percent of such infections (acquired in hospitals) are resistant. Beyond the boundaries of hospitals, about 20 percent have acquired resistance. Today, we fight even more the gram-negative infections which cause 100,000 deaths each year.

There are about 200 million diabetics in the world, and many have been greatly helped by insulin. However, a far better approach for those who have mature onset diabetes, would be the reduction of weight and the lessening of sugar and fat consumption. A proper diet can relieve the necessity for taking insulin, and diabetes is curable without the aid of drugs. (This does not apply to juvenile diabetics.) Few are aware of just how dangerous diabetes can be. Here again, prevention is much better than cure. The lives of diabetics average much less than normal length, and the price of the disease can be such tragedies as blindness and amputation. Dependency on insulin, like dependencies on most drugs, is too often a crutch – a crutch which ultimately hinders proper restoration of health by better means.

In the first half of the nineteenth century bloodletting was such an established procedure in France and other countries that failure to engage in it for a serious illness was tantamount to gross professional negligence. Similarly, in the 1950s, in the Western world, to fail to use anticoagulant drugs for someone with coronary heart disease was viewed as negligence. Now we know much better, after multitudes of lives have been unnecessarily destroyed. This is the story of much of modern medicine. It is particularly true of modern drug therapy.

Adverse Drug Reactions
There are many medical researchers who now stress that the widespread availability of medications does more harm than good. In this land, according to a U.S. National Health Care Expenditure Study, 60.7 percent of the American population had prescriptions filled in a recent year. The average number of prescriptions for each person is twelve. Do Americans rank as the healthiest people in the world? No, they are about fourteenth down on the list. A very con...

There are many indirect results of drug usage where the cause and effect relationship is too frequently ignored. People who take benzodiazepines (Mogadon, Librium, Valium, Dalmame, etc.) have a risk of serious road accidents five times that of the normal risk. Impotence, caused by the use of popular drugs for hypertension, often causes marital breakdowns and divorce. Link with that the fact that marital problems are the largest cause of suicide, and a chief factor in child delinquency, and we begin to see the dimensions of the drug problem.

Despite unfounded reports to the contrary, the population's health is not improving. Britain, for example, has over thirty years of free universal health care behind it, yet 56 percent of all men and 70 percent of all women report that they suffer from chronic health problems. In that country, 18 percent of all men and 28 percent of all women are constantly taking prescribed medication. In the UK, as well as in the USA, hospitalization rates have been continually rising. In this country, middle-aged people can anticipate more years of infirmity and prolonged illness than their counterparts of earlier decades. Until this century, the average period of infirmity prior to death was about 1 percent of the life span, but now it is frequently 10 percent or more. Not all of this can be attributed to life-span increase.
There's a probable total of over 130,000 deaths in hospitals each year due to drugs. 

In the USA, hospital patients are given about eight different drugs, and one 

Once in the hospital one 

Between 1 and 2 million people are admitted to the hospital every year because of adverse reactions to drugs. 

The history of drug medication is a history of miracle finds, disappointment, death, and recall.

The placebo effect accounts for most of the good results of drug therapy.

No drug is like an arrow that goes directly to the target. Every drug is much more like a bundle of porcupine quills, hitting and hurting indiscriminately, as well as occasionally helping.

Thalidomide, phenacetin, paracetamol, and a host of other drugs have left behind them a trail of broken lives, tragedy, and death.

Drugs do have a place in rational medical therapy, but only rarely should they occupy a primary place. Rightly used, they are more frequently a last resort.

Patients are as much or more to blame as physicians for excessive overmedication. Too many patients demand a prescription. Instead, they should think about changing their life-styles, unless the problem under consideration is an emergency.

The lavish use of antibiotics has resulted in the multiplying of resistant bacteria. Gram-negative infections cause 100,000 deaths a year.

Drugs usually aim at treating symptoms rather than curing diseases and often create a dangerous dependency.

In the USA, hospital patients are given about eight different drugs, and one-seventh of hospital days are devoted to the care of drug toxicity.

There's a probable total of over 130,000 deaths in hospitals each year due to drugs.
REFERENCES
1. *Cured to Death*, p. 103.
CHAPTER 18
America's Favorite Poison: Tobacco

Most researchers declare that the use of tobacco is the chief single preventable cause of death. This chapter discusses the problem and makes some practical suggestions for the 90 percent of smokers who wish to break the habit.

* * * *

Smoking-related diseases are such important causes of disability and premature death in developed countries that the control of cigarette smoking could do more to improve health and to prolong life in these countries than any single action in the whole field of preventive medicine.

The World Health Organization

* * * *

Millions "kid" themselves that it is a manly habit. Actually it is a hangover from sucking at the breast as an infant, and 90 percent of those immature enough to be still sucking after diapers wish they weren't. But the white coffin nails hold them fast however much they gurgle or cry.

D.F.

* * * *

The Great Puff Out

The human race seems strangely bent upon destroying itself. Not only have we piled up over 60,000 nuclear weapons, enough to destroy the world many times over, but individually as well as nationally we seem bent on self-destruction. Most people in the western world are addicted to drugs of one type or another. It's a humiliating thought, but the average Mr. and Mrs. American is a junkie. Alcohol, tobacco, caffeine, are our favorite drugs and they are all costly in terms of health as well as dollars.

The largest single unnecessary cause of death is the tobacco habit. Observe the monotonous emphasis revealed by the opening sentence of certain contemporary authorities. *The American Heart Association Heart Book*: "Cigarette smoking is the most significant preventable cause of premature death and disability in the United States today."

*The Harvard Medical School Health Letter Book*: "It is an unequivocal fact that cigarette smoking is this nation's number one injurious personal habit."

*The Best Medicine*: "The tobacco habit is the largest single cause of disease and premature death in the United States."

Recently, over television, a prominent newsman declared "In America only the unenlightened continue to smoke." We would that he were correct. The fact is that 50 million people continue to smoke. Ninety percent of people who now smoke have tried to give it up and failed. The old joke about those who read so much about the evil of smoking that they gave up — reading, is not the whole truth. Millions of people think they cannot give up smoking. In addition to that sad fact, psychologists assure us that there are many emotional reasons for cherishing the vice.

While awareness of the dangers of smoking is usually not enough for victory over the habit, it is nonetheless an indispensable start for the conflict. People need to know that each time they light up they expose themselves to over 4,000 different chemicals, thus increasing the risk of lung cancer, heart attack, high blood pressure, atherosclerosis, pulmonary emphysema, chronic bronchitis, stroke, cancer of the oral cavity and larynx, lip cancer, throat cancer, ulcers, etc. Women who smoke regularly increase the likelihood of miscarriages and stillbirths and hasten the onset of wrinkles.
SMOKING: ONE HAZARDOUS ADAPTATION

Source: National Clearinghouse for Smoking and Health, United States Public Health Service.

The smoke from a nonfiltered cigarette contains approximately 5 billion particles per cubic centimeter, which is 50,000 times as many as are found in the equivalent volume of even a polluted urban atmosphere. In 1604, King James I of England declared that smoking was "a custom loathsome to the eye, harmful to the brain, dangerous to the lungs, and in the black, stinking fume thereof, nearest resembling the horrible Stygian smoke of the pit that is bottomless." Its reputation among nonsmokers is no better today. Many a woman feels that kissing a smoker is like kissing an ashtray. But it must be emphasized that the chief hazard is not aesthetic, it is physical. The smoking habit is a form of slow suicide whether one uses cigarettes, pipes, or cigars, whether one uses filtered or unfiltered cigarettes.

This chart shows the relationship of cigarette smoking on the rate of first heart attack in a ten-year period. As smoking increases to over one pack/day the rate of heart attack is three fold.

(Source: AHA Pooling Project.)

Approximately one-quarter of the deaths from coronary heart disease can be attributed to cigarette smoking. This means approximately 150,000 unnecessary deaths each year. That is a needless loss of life every three minutes. The figure most often quoted today about the complete death toll for smoking is 400,000 per year. That figure includes the greater part of 100,000 for lung cancer alone. The smoker has ten times the likelihood of contracting lung cancer than a nonsmoker. But the figures quoted above show that the risk from heart attack is greater than the risk of lung cancer. The likelihood of heart attack is increased 300 percent by the smoking habit, even more if one is a very heavy smoker.
Tobacco smoke is full of carcinogens and cocarcinogens. These coat the lungs of smokers and enter the cells of the lining of the mouth and tongue, and can destroy the larynx. Other cancers that can be triggered by the tobacco habit include bladder cancer and kidney and pancreatic cancer.

Breast cancer was once the greatest killer of women, but it has now been replaced by lung cancer because women have been smoking more in recent decades. Smoking is even more hazardous for women, because they are the mothers of the race and because they are more prone to osteoporosis which is promoted by smoking, as well as by lack of sunshine, calcium, and physical activity.

It should never be forgotten that smoking is also one of the major causes of fires and traffic accidents. Thus, people who smoke are taking the risk of becoming the cause of death of fellow human beings. The nonsmoker's chances of avoiding accidents, even traffic violations, are five times greater than those of smokers. This is an average figure, of course, that varies according to the degree of smoking. Smokers, on the whole, are less careful about the use of seat belts and thus contribute to their own speedy demise in this way.

Another factor that should influence smokers is that they are violating the Golden Rule as they compel nonsmoking associates to breathe contaminated air. Two-thirds of the smoke contaminants from the end of a held cigarette get into the lungs of all in the room. These contaminants contain much higher amounts of poisons than that which the smoker himself takes through his filtered cigarette – twice as much tar and nicotine, five times as much carbon monoxide, fifty times as much ammonia, and unknown times more cadmium. It should be remembered that once cadmium gets into the lungs it stays there. It is not voided when one leaves the smoke-filled room. So it should be emphasized that whenever a smoker lights up in a million public places, not in private office or automobile, that person drastically interferes with the health of others. Parents particularly should take note of a recent report in Newsweek:

Citing mounting statistical data linking smoking to lung diseases of all sorts, Dr. C. Everett Koop cited "very solid" evidence that secondhand smoke is dangerous – especially to children.

As in past years, the surgeon general's statement was based on various published studies of smoking. In particular, Koop cited evidence that children in smoking households have an increased incidence of respiratory symptoms and occurrence of bronchitis and pneumonia. Such children also, said Koop, "appear to have measurable but small differences" in respiratory capacity as shown by tests of pulmonary function compared with youngsters of nonsmokers. He also noted that they have more days out of school and more frequent hospitalizations. "It seems to me," he said, "a parent interested in the best health of his children would stop."²

Addiction to tobacco is one of the best examples of the fact that most human beings are far more moved by other factors than rational ones. Sigmund Freud certainly did not lack intelligence, but his behavior as regards tobacco was childish. Before he was forty he was smoking twenty cigars a day and was warned by his physician. He quit for seven weeks but later renewed the habit. Again he quit for a period of fourteen months but found his experience to be one of exquisite torture. For twenty years he struggled unsuccessfully against the habit despite increasing heart pain whenever he smoked. When he was sixty-seven he noticed cancerous sores on his palate and jaw, and the next sixteen years of his life witnessed thirty-three operations during which most of his jaw was removed. Frequently he was in severe pain, unable to speak, eat or work. Finally he died of cancer. Some believe it was this unsuccessful struggle with this particular vice that inspired some of his psychological theories.

The fact is, of course, that millions of people with less intelligence than Freud have a similar experience. Some have been warned by doctors that amputation of limbs could be the result of their continued smoking, but they have smoked on. Only those who have tried to break the habit and continually failed know how vicious is the circle in which a habitual smoker is often trapped. Heroin addicts say that kicking tobacco is a harder task than kicking heroin.


Captured by a Weed

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What fools we mortals are! We put alcohol in our mouths to steal our brains, and nicotine in our lungs to steal our lives. The amount of nicotine in a single cigarette, if absorbed immediately, would cause death. It is an effective insecticide. Usually the beginner finds that his body rejects tobacco as a poison. Vomiting often results. But if this warning is ignored, a deadly tolerance develops. About 70 percent of those who smoke more than one cigarette during adolescence will continue to smoke for the following four decades.

Add to such tragic facts this one: the cost to the USA annually is from $50 to $100 billion and that does not take into account government subsidies to tobacco farmers. For an individual, the lifetime cost can be $50,000, which doesn't take into account the interest if the money had been saved instead. Add to that the cost of medical care for the health problems created by smoking; and add to that again the additional financial drain caused by fires, insurance, and sickness time and absence from work. Smokers are fools indeed, but no more so than the rest of us who cherish any single vice.

The Way Out

Not all smokers experience the same difficulty in quitting. Much depends upon the level of addiction already attained prior to the desire to quit. There is one neglected factor which we believe to be extremely important. As surely as a wrong diet can lead to the desire for alcohol, so it is with tobacco. And just as certainly as it is difficult for an ex-drinker to remain dry while on a bad diet, so for the ex-smoker who doesn't change his dietary habits.

Apart from the actual determined decision to refrain from smoking, an improved life-style by right habits of diet and exercise can be the greatest help in overcoming this devastating vice. The diet should be along the lines spoken of in other chapters of this book – fresh whole foods chiefly of vegetable origin. The ex-smoker needs to be twice as careful as others to avoid stimulating foods and unnatural flavoring agents. He should use as little of such items as salt and pepper, and sauces as possible. Every meal should contain an abundance of food that is chiefly low in calories but of high water content such as fruit, vegetables, salads. Remember that most smokers have low levels of vitamin C, for nicotine cancels out that vitamin. They also usually lack other nutrients such as the B vitamins. So people who are fighting the habit should guarantee in their diet a supply of these vitamins in particular. Unless alcohol and caffeine are abstained from, and all other sedatives and stimulants, the urge to return to the tobacco vice usually becomes overwhelming.

A regular exercise program should be commenced. This will help to counter other withdrawal symptoms and it will increase the capacity for discipline. It also counters the tendency to increase weight which many smokers experience.

When the ex-smoker is tempted, he or she should immediately divert the attention to something more absorbing. Remember, whatever gets your attention gets you. If necessary, briefly invoke negative imagery of what tobacco poisons do to the lungs and arteries, and invoke positive images such as that of a healthy, clean, self-loving body; then shift to a spiritual motivation. When Paul declared, "The love of Christ constraineth us" (2 Cor 5:14) he was alluding to the most powerful motivation known to man. Those who keep in heart and mind the image of the crucified Christ will find it much easier to crucify the flesh with its inordinate passions and lusts.

Over 90 percent of nonsmokers kick the habit by individual effort, but some have found it helpful to join group programs such as "The 5-Day Plan" sponsored by the Seventh-day Adventist Church. The American Cancer Society and some hospitals offer similar group sessions.

We commend meditation upon the following verses to all who desire to rid themselves of this dangerous habit:

Your old evil desires were nailed to the cross with him; that part of you that loves to sin was crushed and fatally wounded, so that your sin-loving body is no longer under sin's control, no longer needs to be a slave to sin; for when you are deadened to sin you are freed from all its allure and its power over you. And since your old sin-loving nature "died" with Christ, we know that you will share his new life. Christ rose from the dead and will never die again. Death no longer has any power over him. He died once for all to end sin's power, but now he lives forever in unbroken fellowship with God. So look upon your old sin nature as dead and unresponsive to sin, and instead be alive to God, alert to him, through Jesus Christ our Lord. (Rom 6:6-11) The Living Bible

SUMMARY

Most health authorities affirm that the use of tobacco is the chief unnecessary cause of death in the western world.

Tobacco causes more deaths from heart disease than from lung cancer.

All who smoke in public places are violating the Golden Rule as well as the freedom of others.

More women die of lung cancer than breast cancer.

The use of tobacco illustrates well that many or most of our habits do not spring from rational causes.

Those who follow a traditional diet will find it ten times harder to quit smoking than those who change to the type of diet advocated throughout this book – fresh, whole foods chiefly of vegetable origin.

The best help of all is found in the motivation of the gospel of grace.

REFERENCES

1. The August 22, 1985, issue of The New England Journal of Medicine says:

The estimated annual excess mortality from cigarette smoking in the United States exceeds 350,000, more than the total number of American lives lost in World War I, Korea, and Vietnam combined and almost as many as were lost during World War II. It is estimated that among the 565,000 annual deaths from coronary heart disease, 30 per cent, or 170,000 deaths, are attributable to smoking. Furthermore, 30 per cent of the 412,000 annual cancer deaths – about
125,000 – are attributable to smoking, with 80 per cent resulting from carcinoma of the lung. Chronic obstructive lung diseases such as chronic bronchitis and emphysema account annually for another 62,000 smoking-related deaths. It has been estimated that an average of 5½ minutes of life is lost for each cigarette smoked, on the basis of an average reduction in life expectancy for cigarette smokers of five to eight years ... One recent analysis of mortality suggests that differences in the rates of cigarette smoking between men and women over the age of 30 are the overwhelming cause of male-female longevity differences and that increases in the difference in life expectancy between the sexes since 1930 are largely attributable to cigarette smoking. Although the appraisal probably overstates the contribution of smoking to sex-based differences in longevity, smoking is probably responsible for some of the more than seven years discrepancy in life expectancy between the sexes in the United States. (p. 491)

... Smoking in the presence of other risk factors for coronary heart disease appears to have a synergistic effect on mortality from the disease. A similar effect has also been demonstrated in women smokers using oral contraceptives, who have an approximate 10-fold increase in coronary-heart-disease mortality as compared with women who neither smoke nor use oral contraceptives.

In the United States and other affluent industrial nations, carcinoma of the lung accounts for more deaths than any other cancer. Lung-cancer mortality in the United States has risen sharply, from 18,300 in 1950 to 61,800 in 1969, 98,400 in 1979, and an estimated 131,000 in 1984. Lung cancer now accounts for 25 per cent of cancer mortality and 5 per cent of all deaths of the United States. Between 80 and 85 per cent of deaths from lung cancer are directly attributable to smoking, making smoking the leading cause of cancer mortality in the United States. In 1984 there were an estimated 11,000 new cases and 3750 deaths due to laryngeal cancer. Numerous epidemiologic, pathological, and clinical experimental studies have established a strong association between smoking and laryngeal cancer. One case-control study estimated that 84 per cent of all the laryngeal cancer among men could be attributed to smoking. (p. 492)

The chewing of smokeless tobacco and snuff dipping have also been shown to be associated with an increased risk of oral cancer. (p. 493)


Source: National Cancer Institute, Monograph No. 19 (Hammond Study)
CHAPTER 19
The Cup That Cheers and the Pause That Refreshes: Caffeine

While many researchers criticize the use of caffeine, none have found health advantages in its use.

* * * *

... when he tasted it, he would not drink it.
Matthew 27:34

(It wasn’t coffee or tea that he refused, but a traditional indulgence of the times for those finding living and dying difficult. The moral is not hard to draw.)

* * * *

Drink Up and Pay Later

Modern people in the Western world have a series of crutches to enable them to negotiate life's hard places. Prominent among these crutches are the drugs present in coffee, tea, and cola drinks, etc. While tea is the favorite British household drink, coffee has that place in the USA. In this country, caffeine is the most socially acceptable addicting drug. That it is a drug is made plain by the fact that sudden withdrawal usually causes headache, lethargy, depression, and irritability.

Americans consume 35 million pounds of caffeine per year. No wonder it has become the subject of much debate. What is not debatable is that caffeine is certainly a drug and has typical drug effects. It is a central-nervous-system stimulant, and, as such, produces widely varying effects from irritability to severe insomnia, or constipation.

How slow we are to learn the law of cause and effect, that for every action there is a corresponding reaction! The use of drugs, however mild, is like borrowing money. We pay back all that we get, plus interest. There can be no such thing as the stimulation of the heart by an unnatural means without a corresponding later depression of physical and mental activities.

An average cup of coffee contains about 100 mg of caffeine and about half that amount is found in a typical serving of a cola drink or tea. A typical American early in life begins his caffeine consumption by the use of hot chocolate. As adolescence is approached, cola drinks are added, and then later coffee and tea, as well as medications containing caffeine.

It is true that the experts are not all agreed about caffeine. Controversy follows controversy, and it becomes popular to say that the moderate use of caffeine will do no damage. Such spokesmen also have to concede that it does no good either. Many voices, however, are being raised against caffeine. For example, Dr. H. A. Reimann declared in the Journal of the American Medical Association:

Caffeinism is said to be current among intellectual workers, actresses, waitresses, nocturnal employees, and long-distance automobile drivers. Illness otherwise unexplained may be caused by excessive ingestion of xanthine alkaloids, including those in coffee, tea, cocoa, and those in some popular beverages.¹

When the Massachusetts Institute of Technology conducted experiments with caffeine, it was discovered that within fifteen minutes after ingesting coffee or tea, the temperature of the stomach was increased by 10 to 15 degrees fahrenheit, the secretion of hydrochloric acid increased by up to 400 percent and that of the salivary glands 200 percent. It was found that the heart beat 15 percent faster, the lungs worked 11 percent harder, and the blood vessels became narrower in the brain.

Metabolic rate increased 24 percent, the work of the kidneys became 30 percent stimulated. Increased secretion of hydrochloric acid increased by up to 400 percent and that of the salivary glands 200 percent. It was found that the heart beat 15 percent faster, the lungs worked 11 percent harder, and the blood vessels became narrower in the brain.

Excessive intake of caffeine can predispose the heart to arrhythmias. Caffeine raises blood pressure, intensifies the activity of many of the body's systems, and causes the brain to become more active. The latter may seem a plus, but it should be remembered that mental depression sometimes follows such stimulation. And at such times thought and concentration become more difficult than before.

Like most drugs, caffeine is a cheat. It stimulates the physical organism to greater activity but then brings a corresponding low. The end result is less endurance, not more. The fact that caffeine is addicting should reveal its true nature to all who use it. The fact that headache frequently results when coffee is slopped also shows the nature of the drug. There is evidence that caffeine increases the secretion of insulin by the pancreas which can be accompanied by attacks of weakness, trembling and sweating. Ulceration can also be precipitated or aggravated by the use of caffeined beverages. The impact of caffeine upon nutrition should not be ignored. Caffeine, tannic acid and other components found in tea and coffee cause excretion of significant amounts of B vitamins. Some nutritionists believe that heavy coffee and tea consumption also reduces the body's absorption of iron, calcium and other minerals.

It is true that decaffeinated beverages may be the lesser of two evils, but over the years there have been dangers implicit in the methods of extracting caffeine. Furthermore, not all caffeine can be removed.

Pure water is the drink our Creator intended us to use regularly. It is the true cup that cheers and refreshes. Pure fruit juices may be used as luxuries and at times of festivity, but even they are a poor substitute for whole fruit. The wise man of Ecclesiastes was right when he said that God made men upright, but he has sought out many inventions. Proud man is also stupid, and it takes a long time for him to learn that his inventions usually do more harm than good. It is not possible to improve on the way of life designed for us by our Creator.

SUMMARY

Caffeine is just one more crutch.
The lift we get from caffeine is similar to that we get from borrowing money – but it must be paid back plus interest.
No researchers find health value in caffeine.
Even decaffeinated beverages have their drawbacks.
Try pure water, and occasionally fruit juices.

REFERENCE
It is difficult to overemphasize the profound and pervasive influence of alcohol abuse as a cause of death for Americans. There are an estimated 10 million problem drinkers in the country. In 1977, more than 30,000 Americans died from cirrhosis of the liver – and 95 percent of the deaths were alcohol-related. Alcohol is a contributor to several of the leading causes of death from age 15 to age 70, with direct responsibility for certain cancers of the liver.

It is a risk factor in various other cancers – and, rarely, in diabetes. It is an indirect cause in many of the 150,000 deaths annually from accidents, homicides, and suicides.

Alcohol abuse also is a contributor to family disruption, child and spouse abuse, unwanted pregnancy, rape, assault, other forms of violence, job instability, economic insecurity, and still other problems. Drinking during pregnancy can cause abnormalities in the fetus, leading to mental retardation and other defects. And special problems are presented by the combined use of alcohol and sedatives.

* * * * * *

Wait Till He’s Dried Out

About one in every three homes in urban: America is troubled by excessive use of alcohol. It is almost inevitable that unless an alcoholic gets help from outside himself, he will die of his disease. (We would remind readers that our use of the masculine gender, as elsewhere in this book, is generic and should not be understood as suggesting that the male alone has disease problems.)

Often Christians, consumed with a zeal to help those in urgent need, try to talk sense into a man who is still drunk. It is wasted time and effort. Much heartache, much frustration, would be avoided if sympathetic people remembered that all attempts to convey sweet reason to an alcoholic are in vain until after approximately two weeks “on the water wagon.”

Counselors can talk their hearts out to a drinking alcoholic or an alcoholic still sick and shaky from withdrawal, but the words will get lost in the haze of his brain. Not until the alcoholic is able to think clearly and rationally – somewhere between the second and third week of sobriety, depending on how sick he is – can he begin to understand the nature of his disease and learn what he must do to return his life to normal and maintain his health and sobriety.

Many trying to help alcoholics do understand this point. But for every ten of such, it is doubtful whether there is one who understands the next step – the relationship between nutrition and alcoholism. Before delineating this topic further it should be stressed that all individuals differ in their genetic makeup and their response to chemicals and nutrients is similarly a spectrum rather than identical. Drawing somewhat upon the work of Roger Williams, Katherine Ketcham and Dr. L. A. Mueller make that point as follows:

... nine out of ten people are not susceptible to alcohol’s addictive effects and will never become alcoholics – even if they blatantly neglect their health. The majority of drinkers have an inherent biochemical resistance to developing the disease. Alcoholics and nonalcoholics are physically different, and it is this physical difference, not psychological characteristics or emotional traumas, that determine whether someone will drink additively or not.

... every person in this world is different from everyone else in a variety of ways. We are not carbon copies of each other, ... but totally unique individuals. Our organs vary in size and shape, our hormones are produced at different levels, and our reactions to drugs vary dramatically.

Allergies are another obvious example of biochemical individuality in human beings. Some people sneeze and wheeze over particles of dust, others get an allergic reaction to pollen, penicillin, milk, or shellfish. The same wide range of reactions occurs when different people drink alcohol. One person may take a sip and immediately flush bright red and feel sick to his stomach. In another, a glass of wine may be enough to cause drunken behavior, dizziness, and vomiting. Yet another person can drink three or four times that much and still be sober.

Alcoholism, Williams believes, follows the rules of biochemical individuality: Some people become addicted to alcohol while the majority can drink and never become addicted. And each individual alcoholic reacts differently, with some developing the disease slowly over a period of many years and others reporting blackouts with their very first drink.

In view of these facts, we shall recognize also the likelihood that alcoholics and potential alcoholics will also have considerable variation in their requirements for specific nutrients. But the unchanged denomination is this encouraging truth: the overwhelming craving for alcohol, the changing moods, depression, and irritability suffered by alcoholics drying out can often be solved by due attention to proper nutrition. But without this attention the problems and difficulties will remain and most strugglers will lose the battle. The magnificent achievement of Alcoholics Anonymous would have been still greater had the present nutritional knowledge been available earlier. On the other hand, it should be recognized that for some alcoholics the physical and psychological addiction is so strong that nutritional changes alone have but slight impact while it seems to the
sufferer that every cell of the body cries out for alcohol. For such the twelve steps of A.A. are the primary steps to freedom, and nutritional therapy secondary. Here are those steps:

(1) We admitted we were powerless over alcohol—that our lives had become unmanageable. (2) Came to believe that a Power greater than ourselves could restore us to sanity. (3) Made a decision to turn our will and our lives over to the care of God as we understood Him. (4) Made a searching and fearless moral inventory of ourselves. (5) Admitted to God, to ourselves and to another human being the exact nature of our wrongs. (6) Were entirely ready to have God remove all these defects of character. (7) Humbly asked Him to remove our shortcomings. (8) Made a list of all persons we had harmed, and became willing to make amends to them all. (9) Made direct amends to such people wherever possible, except when to do so would injure them or others. (10) Continued to take personal inventory and when we were wrong, promptly admitted it. (11) Sought through prayer and meditation to improve our conscious contact with God as we understood Him, praying only for knowledge of His will for us and the power to carry that out. (12) Having had a spiritual awakening as the result of these Steps, we tried to carry this message to others, and to practice these principles in all our affairs.

### Effects of Increasing Amounts of Alcohol in the Blood

<table>
<thead>
<tr>
<th>Alcohol Level in the Blood</th>
<th>Approximate Number of Drinks, Quickly Absorbed</th>
<th>Effects</th>
</tr>
</thead>
<tbody>
<tr>
<td>.01%*</td>
<td>1 ounce of whiskey or 1 pint of beer†</td>
<td>Drinker feels stimulated.</td>
</tr>
<tr>
<td>.03%</td>
<td>2 ounces of whiskey or 2 pints of beer</td>
<td>Drinker feels warm, mentally relaxed.</td>
</tr>
<tr>
<td>.05%</td>
<td>4 ounces of whiskey or 4 pints of beer</td>
<td>Drinker's judgment, balance, coordination, and control are no longer normal.</td>
</tr>
<tr>
<td>.10%</td>
<td>6 ounces of whiskey or 6 pints of beer</td>
<td>Drinker's speech is slurred and loud; hearing is dulled; walking, balance, and coordination are noticeably affected. Drinker is legally &quot;under the influence&quot; in some states.</td>
</tr>
<tr>
<td>.15%</td>
<td></td>
<td>Drinker is legally &quot;under the influence&quot; in all states. Drinker's driving ability (hearing, vision, motor control, reaction time) is significantly worsened.</td>
</tr>
<tr>
<td>.20%</td>
<td></td>
<td>Drinker is staggering.</td>
</tr>
<tr>
<td>.30%</td>
<td></td>
<td>Drinker has trouble standing, staying awake, understanding what is going on nearby. Drinker vomits.</td>
</tr>
<tr>
<td>.40%</td>
<td></td>
<td>Drinker will be unconscious.</td>
</tr>
<tr>
<td>.50%</td>
<td></td>
<td>Drinker's life is in danger because of paralysis of parts of the nervous system that control breathing. This concentration of alcohol is usually fatal.</td>
</tr>
</tbody>
</table>

* .01% = 1/100 of 1%, or 1 part alcohol to 10,000 parts blood.
† 1 ounce = 30 cubic centimeters; 1 pint (16 ounces) = 480 cubic centimeters, or almost a half-liter.

### The ABC of Alcoholic Care

Ketcham and Mueller refer to the ABC of caring for those recovering from alcoholism: A-Abstinence; B-Body healing; C-Counseling. Abstinence is obvious enough. So long as an alcoholic continues to drink, nothing can save him. Body healing involves the work of nutritional therapy. Proper diet will greatly reduce the likelihood of relapse. Counseling involves information on the cause and effect factors of alcohol. Among other things, sufferers need to be instructed as to what alcohol does in robbing them of the essential food elements, which robbery provokes the vicious circle syndrome leading as it does to increased desire for the very thing which is killing them.

The missing link too often in work for alcoholics has been the nutritional one. What is needed is not complicated or esoteric. While basic vitamin tablets may be needed along with mineral supplements in the early stages, of chief importance is the habitual use of the type of diet consistently advocated throughout this book: fresh whole food, chiefly of vegetable origin.

There is another therapy that readers of this book are probably more likely to invoke than others seeking to help alcoholics—namely the motivation of the gospel. According to Romans 6, when a sinner sees that his old sinful nature was crucified with Christ and taken to the grave, at that point, by faith, freedom from the old defeats may be claimed. When this conviction dawns, with it comes a new strength and a new life!

### SUMMARY

Unless an alcoholic gets help from outside himself usually he will die of his disease.
The endeavor to talk sense into a person still drunk is wasted time and effort. It may take two weeks of sobriety before counsel can be really understood.

There is a close relationship between nutrition and alcoholism. Alcoholics and potential alcoholics have considerable variation in their requirements for specific nutrients.

But all alcoholics can be helped by due attention to proper diet; whereas without that attention, the difficulties will continue and most strugglers will lose the battle.

The three elements needed are abstinence, body healing, counseling.

By a body healing we mean beneficial effects of nutritional therapy which greatly reduce the likelihood of relapse.

Nutrition guidelines given elsewhere in this book are the ones needed for the alcoholic.

The counseling should include the principles given by Alcoholics Anonymous but with the added weight and motivation of the Christian gospel.

ADAPTED FROM BORKENSTEIN, GRAND RAPIDS STUDY, 1964

![Graph showing relative risk of crash vs. blood alcohol concentration and number of drinks.](image)


REFERENCES
2. Ibid., p. 140.
3. Ibid., p. 131.
4. Ibid., p. 134.
CHAPTER 21

The Scriptural Case For Total Abstinence From Alcohol

A review of the biblical data about intoxicating and nonintoxicating drinks.

Wine is a mocker, strong drink a brawler; and whoever is led astray by it is not wise. (Pr 20:1)

Alcohol is a factor in more than 10 percent of all deaths in the United States.

Ibid., p. 7.

Drink has taken five million men and women in the United States, taken them as a master takes slaves, and new acquisitions are going on at the rate of 200,000 a year.

[Observe that the numbers have more than doubled since this statement was first made]

One In Every Ten Deaths

The subject is an important one, because one in every ten drinkers becomes an alcoholic, which, in effect, means that one in every ten drinkers becomes a lifelong problem to himself, his loved ones, and all whom he encounters. Alcoholism is a recognized disease in the world today, and this aspect of health is but one section of the picture. Other parts of the scene include sickness, suffering, crime, economic loss, broken homes and quarreling. One in every ten deaths in the USA can be traced to alcohol. No other drug does so much damage nationwide.

In America, there are approximately 10-15 million alcoholics and a similar proportion exists in other industrialized countries. State and federal treasuries accrue large sums from taxes on alcohol, but because many of the politicians themselves are consumers, they never stop to study the statistics that prove that alcohol costs the taxpayer much more than it brings in the form of taxes.

Even national security, as well as personal security, is involved in this problem. During World War II, General George Marshall is reported to have said that cocktail lounges in Washington were a greater menace to our country than some of our battlefield problems. The situation remains the same today, with illicit sex thrown in as an extra. Surgeons report their heaviest times to be on weekends because of the higher number of automobile accidents in which alcohol is a very frequent causative factor. Ministers must give an inordinate amount of time in an endeavor to keep married couples together in cases where alcohol makes it almost imperative for them to live apart.

Some items should first be stated by way of background to the study of the biblical picture. First, it should be stressed that the discovery of distillation has rendered possible an enormous increase in the amount of alcohol in beverages. Undoubtedly, many of the wines referred to in the Scriptures had alcoholic content, but it is doubtful that any of them had anything like the alcoholic content of many modern drinks. Second, it should be remembered that even though many of the Bible wines were fermented, they were not all intoxicating. To suppose that a fermented article must be intoxicating is an obvious fallacy. In view of the familiar fact that nearly all the bread we eat is fermented, not a particle is inebriating, and the greatest bread eaters are never known to be in the slightest degree drunk. The explanation is simple – the alcohol formed in the dough by the action of the yeast upon the sugar in the flour, is expelled in the baking. And a large part of ancient wines were boiled and reduced to a jelly state, and thus were nonalcoholic. Furthermore, it was the frequent custom to filter away the gluten of grape juice, in order to break its strength, and the wine was often mixed with two and three and even four times its own bulk of water. Thus, the result of fermentation must have been to provide, as in ginger beer, a liquid practically unlike an intoxicating drink.

Relationship Between Type and Amount of Alcoholic Beverages Consumed and the Estimated Potential Blood-Alcohol Concentration
For each hour additional subtract 0.015% w/v from the number shown.


Adapted from "Alcohol & the Impaired Driver" (AMA)

Possibly the greatest misunderstanding that needs to be cleared up in the background of this subject, is the idea that certain words in the New Testament mean intoxicating wines, and other words mean nonintoxicating wines. This is not the case. Only the Bible context in each case can declare what type of wine is being referred to, as the original terms have a wide variety of meanings. Even in our own tongue, certain terms spelled the same way, have various meanings. The word "air" can be applied in the following ways: "I threw a ball into the air." "She has a haughty air." "That's a sweet air you're singing." The word is the same, the meaning is different. The case is identical with the Bible words for wine. For example, Baker's Dictionary of Theology, one of the most authoritative, modern works, has this to say in the article on "wines."

"Tiros," which is one of the words for wine, has reference to fresh grape juice before and during fermentation. The word is also used of the juice while it is still in the grape as in "the new wine found in the cluster" (see Is 65:8). However, in some passages, it clearly denotes the fermented juice of the grape (see Hos 4:11).

The case for total abstinence should never be based merely on biblical language factors. Neither should the opposite case be so structured. In Hebrew, Chaldee, Greek, Syriac, Arabic, Latin and English, the words for "wine" in all these languages are originally and always inclusively used for both the blood of the grape in its primitive and natural condition, and that juice both boiled and fermented.

The most frequent word for "wine" in the Old Testament is "yayin." This word occurs 141 times in the Bible. In Nehemiah 5:18, there is the phrase - "all sorts of wine" - all sorts of yayin. This makes it clear that the word applies to more than one type of drink. In Deuteronomy 28:39, Yayin is referred to as something that's gathered in by hand – therefore it must apply to grapes on the vine. In Isaiah 16:10 and Jeremiah 48:33, the word yayin is used for grapes to be trodden in the vat. In Jeremiah 40:10 and 12, the word is applied to the grape in the cluster. In Proverbs 9:2 and 5, yayin seems to point to a boiled wine or a syrup, the thickness of which made it needful to mingle water with it for drinking. It was probably consumed with milk (see Is 55:1 and compare Is 7:22). There was also a yayin that was mixed with drugs of various sorts – the mixed wine of the sensualist, spiced and inebriating; a cup of still stronger ingredients and used as the emblem of divine judgments (see Ps 75:8). The word is applied to every species of fermented grape juice (see Pr 23:31, where it is described as red and sparkling, and in which condition we are forbidden to look upon it with desire). Not in one half of the 141 texts, however, can this word be shown to mean that such wine was the kind to which the word was always applied. The context does not lend support to this position in more than half the texts.

To clarify this position, there is no word such as "slave" to be found in the whole Bible, either in the Hebrew or Greek, paradoxical as this statement may appear. There is no word that means distinctively and exclusively what we mean by "slave." The Hebrew word "ebed" includes service of every kind, and the condition of service cannot be learned from the word itself.
Similarly, the Hebrew word (generic) for wine, "yayin," includes grape juice in many states and the special quality cannot be learned from the word itself. There is no word for fermented wine in the Bible, no word meaning only that.

Our Presuppositions Lead Us Astray

Another matter to be kept in mind as we study this question is that Bible texts are often interpreted by our modern presuppositions, not according to what they originally meant. For example, the New Testament warns about those that are given to too much wine, and this is often misunderstood as meaning fermented wine, or intoxicating wine. However, this idea takes for granted that only intoxicating wine was capable of abuse. Contemporary writers point out that many of the ancients gluttoned themselves with foods and drinks good in themselves. One poet says, "You were all day gluttoning yourselves with white milk." Even Solomon declared much honey is not good. Wholesome food is a desirable thing, but to eat all day of wholesome food would not be desirable; that would be a matter of being given to too much food.

With these assumptions in mind, we will be prepared to consider each Bible text according to its context. One thing is undeniable, and that is that the Scripture does contain severe warnings against the wine that intoxicates. We read in Habakkuk 2:5 that wine deceiveth a man and "enlarges his desire as hell." We read in Habakkuk 2:15 that it is a mocker and defrauder, and "woe to him that giveth his neighbor drink!" The Scripture says, "Look not upon it lest your eyes look upon strange women and thy heart go after perverse things." We also read in Scripture that God's priest while doing his work shall drink no strong drink, lest he die. Scripture tells us that the very strongest man was so reared in harmony with instruction from the angels of heaven, that both mother and child were to abstain completely from all products of the grape, in case intoxication should result. Furthermore, the wine that intoxicates is spoken of as a poison – a poison of the serpent and of the basilisk (see Dt 32:32, 33; Hos 7:5 and Hab 2:15). Proverbs 20:1 says that "wine is a mocker, strong drink a brawler; and whoever is led astray by it is not wise." In 1 Corinthians 6:10-12, we are told that no drunkard shall ever enter the kingdom of heaven. Inasmuch as one in every ten persons is likely to become a drunkard, this single text alone in the New Testament, which tells us that no drunkard shall enter the kingdom of heaven should be sufficient evidence to restrain all men from partaking of alcohol.

Consider also this text, 1 Corinthians 5:11: "Now I have written unto you not to keep company, if any man that is called a brother be a fornicator, or covetous, or an idolater, or a raper, or a drunkard, or an extortioner -- with such an one, no not to eat." Romans 13:13 declares, "Let us walk honestly as the day, not in rioting, or in drunkenness ..." In Galatians 5:21, we read that the works of the flesh include "envyings, murders, drunkenness, revellings and suchlike, ... that they which do such things shall not inherit the kingdom of God."

Because many other texts are employed by some to try and contradict the ones that have been quoted, which are very clear in themselves, some extra facts regarding the history of wine in Bible countries should be mentioned. The grape was an important staple item of food among the Hebrews, and primitive means of preserving its use were widely used. Three popular methods were:

1. To heat it just below boiling point and bottle it in gourds, jars or skins; sealing it off while hot with oil and pitch; which is rather similar to our modern methods of preserving.
2. It was possible to simmer it beside the fire until it reached the consistency of our syrup, rich in sugar and pleasant acids that would keep as well as modern jam, and was returned to drinking consistency by adding water, or as a luxury, with milk.
3. It could be dried out, so to speak, placed near a fire until it had almost the consistency of cheese or a heavy conserve. This had to be brought back to drinking consistency by dissolving it in water.

All these products in the Bible are classified as wine. Little fermented wine was made or used by the Israelites until after the days of David, although its occasional previous use is alluded to. With the phenomenal prosperity that came in Solomon's reign, there was also the abandonment to questionable luxuries. The Babylonian ways of living were copied. The

Misused Bible Passages

Consider one or two texts that are wrongly quoted. "Drink no longer water, but use a little wine for thy stomach's sake and thine often infirmities" (1 Ti 5:23). First note that it was a little wine; second, it was for the stomach's sake; it was medicinal and suggested purely as medicine, not as a beverage.

There was a special wine for the stomach in Paul's day. Pliny, the writer of the first century A.D., gives a recipe for it. It was carefully prepared by straining the gluten from the fresh grape juice. It was to be heated and sealed hot with oil and then kept in a well or other cold place to prevent any trace of fermentation. Even those who will not accept such explanations as these, cannot use the text, because Paul's advice is – use a little, and only for an infirmity.

As regards the marriage-feast wine, this is much debated and is best settled by principles underlying the whole, namely the significance of the symbolism. Throughout the Old Testament, fermentation is a symbol of sin, and in the miracle that Christ
performed we have the symbolism that points to the plan of salvation, the change of the human heart from sin to righteousness, from water to God's wine. However, some things can be said regarding the historical situation. This was a wedding feast, a sacred feast, and such feasts usually lasted for six days, but nothing fermented was permitted at a sacred function among good Jews. Where the M.C. of the feast speaks about keeping the good wine until now, the Greek words used here for good wine mean literally, "wine of the first quality, A.1.," and this would be interpreted by many to mean that which had the least trace of ferment or mold. It's certainly incompatible with the character of Jesus that he should produce an intoxicant, especially at a function where young people would be gathered for several days. There is no evidence that the Master made fermented wine, and there is a mass of circumstantial evidence that he made a natural, wholesome beverage in common use in those times among the poor. And, furthermore, he made the very best. Its results were wholesome, as were the results of all his deeds. Similar facts can be declared with reference to the wine at the Last Supper. It should be noticed that the word wine is never used in the record of the Last Supper, rather it is "the fruit of the vine." It was a Passover Feast, and at such a feast a trace of anything fermented was strictly forbidden (see Ex 12:19). The Jewish Mishnah sets out emphatically how the Passover Feast was to be prepared. Where fresh wine or grape juice was not available, raisins were to be steeped in hot water to make a suitable beverage.

The text, Ephesians 5:18, "... be not drunk with wine, wherein is excess ..." deserves a mention. Frequently, this text is quoted to suggest that it is excessive use of wine that Paul is here condemning, but the Greek word-ending links together the words wine and excess, not drunkenness and excess. In other words, Paul is warning us not to be drunk with wine — the kind used by the Ephesians, which is the creator or source of excess. The excess or elements of prodigality (see the Revised Version), are in the wine itself, not in overindulgence, as is often wrongly claimed. Matthew 9:17 speaks about old wine in new bottles, and here a well-known precaution is referred to. Keeping the grape juice required new skins, or new gourds had to be used, because traces of fermentation might develop in previously used vessels. No skin could possibly hold fermented juices without bursting in a very short while.

The Case for Abstinence

Let us notice Christ's example on the cross. There were two occasions on the cross when he was offered something to drink. Mark 15:23 tells us "they gave him wine mingled with myrrh". This was a drugged intoxicant, evidently supplied by a society of compassionate women who had existed ever since crucifixions had been instituted. Jesus was going into the presence of his Father. He would die fully conscious of his act, bearing the sins of humanity, and so when he became aware of the deadening nature of the first drink offered, he chose the way of sacrifice. "He would not drink" says the Scripture. The second instance is referred to in John 19:29 "a sponge filled with vinegar" — which was Roman ration wine, sour, vinegar-like, nonintoxicating. This he did accept to quench his thirst. Christ was not an ascetic. All things that were of help to man, he himself accepted.

In summary, let it be said that there are nearly 250 references to wine and strong drink in the Bible, and 200 of these are condemnatory. There's not one passage mentioning intoxicating liquors that speaks well of them. Many of the condemnations of the fermented wine are emphatic, e.g., "wine is a mocker, strong drink is raging," that is, maddening (Pr 20:1). Holy Writ does not in a single passage condone intoxication. It does emphasize the wisdom and advantages of abstinence, for instance, in the case of Daniel and his friends (in Babylon), the Nazarites, the Rechabites, and Solomon's advice to King Lemuel (Pr 31:4).

Let us also consider a very simple way of presenting this issue to someone who wishes to dwell upon the uncertainty surrounding the case and the use of specific texts. The method we would suggest, is to base our case on biblical principles, rather than isolated texts. Roland H. Bainton wrote an article on this matter in Christianity Today, July 7, 1958. We quote:

> Recent investigations have taught us that alcohol is not a stimulant, but a sedative, which relaxes the controls of intelligence and willing. The consumption of alcohol may develop into the disease known as alcoholism. Some persons by reason of personality factors, perhaps physical factors, are predisposed to this disease. No one can tell in advance, whether he is of this type. He can find out only by getting well on the road to alcoholism, then to stop is a frightful struggle.

This is the situation described by sober investigators. To this situation biblical principles must be brought to bear.

The first principle is this — "Know ye not that your bodies are members of Christ?" "Know ye not that your body is the temple of the Holy Spirit ...?" (1 Cor 6:15, 19). The question is, what dishonors the body? Many will hold that a moderate use of alcoholic beverages is not dishonor; others will reply that although a moderate use under carefully controlled conditions is no dishonor, nevertheless, the moderate can lead to the immoderate, and the consequences of immoderate use in our highly mechanized society are so drastic that one is wise to preclude the possibility of excess by refraining from the moderate which may lead to it.

The second great biblical principle is consideration for the weaker brother. The classic passage is Romans 14, "For one believeth that he may eat all things; another who is weak [that is, weak in the faith or conscience] eateth herbs. Let not him that eateth despise him that eateth not and let not him who eateth not judge him that eateth ... Let us not therefore judge one another anymore, but judge this rather, that no man put a stumbling block in his brother's way ... It is good neither to eat flesh nor to drink wine, nor anything whereby thy brother stumblith ..." If we translate these precepts into our own situation, we may say there are some who are capable of drinking in moderation, but others either for physical or psychological reasons are in danger of the lost weekend. For the sake of such people, those who can drink without excess should abstain in order to create a social environment in which abstinence is not an act of courage, but accepted behavior. "These two principles — that our bodies are temples of the Holy Spirit and that the strong should accommodate themselves for the weak — are the biblical grounds on which I base my practice and teaching of total abstinence." Thus says Roland H. Bainton in his article, and this argument from biblical principle is an irrebuttable one. While people may argue until the cows come home on certain isolated texts, it is impossible to argue with the case as set out by Bainton. The unbeliever says about debatable situations: "When in doubt try it out," but the believer on the basis of Romans 14:23 says, "When in doubt, leave it out."

SUMMARY
Inasmuch as there is a one in ten chance at least of becoming an alcoholic when one begins to drink, no one has the right to begin the habit.

The discovery of distillation in modern times has made possible an enormous increase in the amount of alcohol in beverages. Not many of the Bible wines were fermented. They were not all intoxicating. Many ancient wines were boiled and reduced to a jelly state and thus were nonalcoholic.

Nevertheless, alcoholism was known and condemned in Bible times. There is no specific word for wine in either Hebrew or Greek that means only intoxicating wines or unintoxicating wines. Only the context can determine the type of wine being referred to in each instance.

The typical, most often used word in the Hebrew for wine is Yayin, and it includes the juice of the grape in many states. In Christ's day there were over 300 types of wine in use, including many that were unfermented.

The admonition of 1 Timothy 5:23 has to do with the medicinal use for digestive ailments. Observe that it is "a little wine" that is recommended and not for the palate's sake but for the stomach's sake.

There are nearly 250 references to wine and strong drink in the Bible and 200 of these are condemnatory. There is not one passage mentioning intoxicating liquors that speaks well of them.

The believer who recognizes his body as the temple of the Holy Ghost and his physical members as members of Christ, will not feel free to debase his physical organism in any way.

Because of the great biblical principle that we must consider our weaker brother, our influence must be taken into account as we decide upon each separate course of action. Scripture says "It is good not to eat flesh nor to drink wine, nor to do anything whereby thy brother stumbleth" (Rom 14:21).

In uncertain situations the unbeliever says, "When in doubt, try it out." But the believer, on the contrary, declares, "When in doubt, leave it out."

Every day there are multitudes of accidents on the great lines of travel because of alcoholism. We are not entitled to take risks that endanger others.
CHAPTER 22
Playing Life's Melody in the Key of "B Natural"

Most sickness comes because the laws of nature are defied as a result of faulty training and dependence on custom and tradition. It is impossible now to live as though in the Garden of Eden, yet we should ever strive to come closer to nature and be in harmony with its principles.

* * * *

If a man does not keep pace with his companions, perhaps it is because he hears a different drummer. Let him step to the music which he hears, however measured or far away.

Thoreau, Walden

* * * *

"Don't Follow the Crowd!"

Of course, in a world under the curse, we cannot live precisely as the inhabitants of Eden. Our first parents knew nothing of great climatic changes, of winds and storms, icy blasts, or annoying humidity. But as for us, we cannot live under leafy bowers. We need shelter from the weather, from animals, and from men. Having admitted to all that, it remains true that most of us could live lives more in harmony with nature than we do. The purpose of this chapter is to suggest some principles that will guide us in that direction.

Our ancestors spent most of the day in physical activity connected with the production and securing of food. The average person of other centuries obtained in the course of his or her work as much exercise as a first-class athlete now secures by disciplined effort. Today, in order to live according to "the key of B natural" discipline is indispensable, and here, because of the motivation of the gospel, the Christian has a head start.

Until the time of the Industrial Revolution, only about 1 or 2 percent of the world's population lived in cities. Even in the late nineteenth century, about 85 percent of the population of the USA was rural, not urban. Now, with the growth of great cities in every land, from one-third to one-half of people live in industrialized urban centers. This shift to the city means that man has become fixed. That is to say, he is no longer constantly on the move as in a pastoral or agricultural setting. Today he is literally "boxed in." He lives in a big box which consists of a series of little boxes and the whole we call a house. Attached to it is another box which we call a garage which contains another box which we call an automobile. In the smaller box we move to another box which is the office. Sometimes for recreation people go to a larger box that they call a theater. Indeed, we are all boxed in, until we are put in that box men call a coffin.

Most of Our Pain Comes from Following the Crowd

People never think about it, but it is certain that the great majority of life's sorrows and tragedies grow out of the fact that we human beings, since the Fall, are born conformists and, like sheep, we follow the leaders of custom, tradition, and fashion. Most of us are aware of the loose life-style common to a large number of fashion designers, but forget that this often applies to other fashions besides clothes — fashions in amusements, fashions in sports, fashions in patterns of spending, eating, drinking, or having sex. Scripture says, "Thou shalt not follow a multitude to do evil" (Ex 23:2). A Christian is always a nonconformist in matters of principle, and in so doing gains health of body and soul.

A believer is constrained by the love of Christ to meticulously examine all his habits and practices. "Whether therefore ye eat or drink, or whatsoever ye do, do all to the glory of God." (1 Cor 10:31). Examples will spring readily to the mind of each reader. Take, for example, the way we deal with night and day. The pattern of nature is clear. As God draws the shades in the evening we were intended to slow down our activities that the evening might be a pleasant time of fellowship for the family. As a rule the labor of the day should not be prolonged into the hours of darkness. There will be emergencies, and special occasions of service, when work is called for during the night hours, but this should not be our habitual practice. Remember that "those that burn the candle at both ends are soon through." We all have the constraints of society upon us, and some of these are justified and therefore prevent our living entirely as we would otherwise choose. But exceptions must not become the rule, or life will become distorted and even diseased.

Then there is the habit of sitting. We rarely stop to think about it, but for most of us it would be very easy to spend twenty-three out of twenty-four hours in a still position of either sitting or reclining. Hardly anything else could be so deleterious to our health. The body has about 650 muscles and they all were intended to be used daily. Unless the muscles are employed, the lungs never breathe deeply. Lungs that are never fully inflated house within them increased amounts of noxious bacteria. As our immune system deteriorates, some of these toxins will bring sickness upon us. Moreover, food cannot be properly metabolized if the furnace fires of the body are not frequently going at full blast. God intended that active muscles should lead to filled lungs which in turn would oxygenate the blood going to every tissue and cell of the body. Unless oxygen is carried to the body cells they cannot function adequately. Oxygen is necessary for the utilization of the elements of the food we eat. Blood that has been properly oxygenated is carried by a vigorous circulation to all parts of the body not only providing nourishment, but removing cell residues which, if retained, lead to fatigue and ultimately sickness. Perfect health depends upon perfect circulation and perfect circulation is impossible without frequent physical activity. It should be a rare occasion when one has to sit for more than an hour at a time. Even on board a plane on a long journey, it pays to get up and move about every three-quarters of an hour or so.

Similarly, it should become our practice not to use the car for every yard that we must travel. It would be good for us to frequently park some distance away from the office, or the store, or the home which we visit. Learn to use the stairs rather than the elevator. Take every excuse to cause the body to function as the Creator designed it.
Try not to drive everywhere, or at least not all the way. Learn to walk often.

Few people study their working conditions as they should. All should consider the environment in which they spend many hours. We should do what we can about lighting and ventilation and the avoidance of poisonous fumes. Many offices are poorly ventilated, and thousands are suffering from allergic reactions to the chemicals encountered in their workplace. Until midway through the 1940s, radiologists were not aware how perilous was their profession. They died much younger than their fellow physicians. That is an extreme example of the impact of our health upon our work. We can never fully attain to our ideals, but all should strive after pure air, pure water, pure food, and purity of thought and action. We are not our own, "we were bought with a price."

When the first automobiles appeared, 90 percent of their construction was geared to the one end of transport and there were only about 10 percent of frills. Today it is the opposite. Today about 10 percent of the automobile is geared to actual transport and about 90 percent to frills. This is characteristic of much of life, and the Christian frequently needs to inquire whether he is paying too much in time and energy or money for the mere frills of existence. The Christian must have recreation, but does it live up to its name? Does it really recreate?

How Do You Holiday, Eat and Read?

For instance, do not feel that you must always spend your holidays in the same way as your neighbors. On holidays it is often wise to consider an alternative life-style to the rest of the year. If, for example, one is indoors continually day to day, week to week, and month to month throughout the year, one ought to consider a vacation in God's great out-of-doors camping. If one is living and working in the city, why not consider holidays away from the city? If one is tied to close work for one's occupation, why not get away from all such close activities on the vacation, so the eyes and nerves and brain can be rested? If one is continually living to deadlines in one's profession or calling, choose a holiday where there won't be any. Those who are forever rushing must soon come to a dead stop. Life calls for a rhythm, and those who violate this law must pay the penalty.

We have already had much to say about the fashions in diet. For those who know something of dietetics, it is both interesting and tragic to stand near the checkout counters of a supermarket and see what people buy. The majority of foods found in the supermarket carts are foods that have been denatured, refined, poisoned, embalmed, purified, pickled, preserved, etc. They are dead foods, and in the process of time will lead to the early death of their consumers. When someone who knows the truth of the importance of nutrition, takes his selection of foodstuffs to the counter, it is often met with an expression of surprise, for the contrast is so great.

Consider the reading matter of our generation. Did you know that the books which are the best-sellers today are often entirely forgotten within a decade? In contrast, a classic is a work that appeals to generation after generation because it reflects truths about reality. Don't feel constrained to read every new best-seller. Certainly refuse to put into your mind anything that will motivate you away from the true and the pure. Whatever gets our attention, gets us, and all people ultimately do what they have been constantly thinking about. Wrong feelings and wrong actions are the results of wrong thoughts. No Christian should dwell on scenes of immorality. We are given the privilege of seeing the light of the sun and beauty of the earth on the condition that we use our eyelids at appropriate times to shut out the evil. All of life reflects the Edenic situation where Adam and Eve had an overwhelming majority of good things to use, on the condition that they abstain from touching the tree in the midst of the garden – the tree of the knowledge of good and evil. Men and women have the privilege of sex in marriage, but it is on the condition that they abstain from immorality. Men and women have the privilege of the natural flavors of food and drink, but it is on the condition that they abstain from perverted taste. Ours is the joy of reading the Scriptures and books that tend toward usefulness and holiness, on the condition we do not read those books that should be burned (see Acts 19:19).

On one occasion our Lord said to one he had healed "... sin no more lest a worse thing come upon thee" (Jn 5:14). This does not mean that all sickness is the result of sin, but it does mean that such is too frequently the case. Those who knowingly go against conscience, who regularly violate the laws of God and the laws of nature, inevitably reap the whirlwind in sickness. We live in a very sick world where more than half the people over forty have one or more chronic diseases, and most of this is a result of carelessness and willfulness in life-style, the result of conformity to custom, tradition, and fashion rather than conformity to the principles of the Word of God, modern science and common sense.

Is the Christian way then a restricted narrow way without pleasure, or joy, or reward? Of course not. God be praised. He loves us so much that we can be sure that there is a promise in every command of his, there is a blessing in every "thou shalt" and "thou shalt not." In all our affliction, he is afflicted. He is touched with the feeling of our infirmities, and he longs to save us from unnecessary pain and heartache. "Like as a father pitieth his children, so the Lord pitieth them that fear [revere] him" (Ps 103:13). The old hymn is right: "Trust and obey, for there's no other way, to be happy in Jesus, but to trust and obey."

SUMMARY

Most of life's fashions are not based on principles of divine revelation or even on logical thinking. Most of the things that most of us do most of the time are not the result of careful thought but of custom and tradition. The prevailing unhealthy traditions of our time include sedentary living, cloistered, living away from the natural elements of sun and breeze, and the use of manipulated foods.

To do what everybody else does will result in our being as sick as most people become.

Examine your home and working environments from the standpoint of health and make the necessary changes where possible.

Try not to drive everywhere, or at least not all the way. Learn to walk often.
Live as much in the open air as possible.
If you follow the fashions of the mob in what you feed your body, mind and spirit, your ultimate destination will be the same. There is better company elsewhere.
In every command of God there is a promise. All his biddings are for our ultimate blessing.
Remember, we are what we are because we have been doing what we have been doing.
To live a thoughtful disciplined life does not mean a life without pleasure, joy, or reward, but the opposite. Every command of God contains a promise.
Those Sheep Keep Coming, and Coming, and Coming

Our nights reflect our days and our sleeping habits reflect our living habits. Worry about insomnia does more harm than the insomnia itself. The secret of sleep is to be relaxed in body and mind – this includes not caring whether we sleep or not, but resting nonetheless.

... Actually the human mind is so constituted that it requires occasional periods of time devoted to mere meditation. The mind is not capable of maintaining its efficiency if it operates under pressure during every moment of the waking hours. It may be compared to a bank in which active business with patrons is carried on from 10 a.m. to 3 p.m. However, the bank employees remain for two or three hours beyond the time the doors are closed. During this time, after the day's business is over, the employees are busy making out statements, filing records, and otherwise keeping the bank in running condition.

So with the mind. There must be periods of relative inactivity during which the press of the day's duties is more or less excluded, permitting repairs, as it were, on the memory pathways, and allowing the conscious thoughts to arrive at an orientation. It is during such times of meditation that important conclusions are drawn and the bases for major decisions are laid. When an individual forces his mind to be constantly active for many hours, the need for solitude and meditation encroaches on the time that would otherwise be spent in sleep. A person must meditate. If he does not allow time for this during his waking hours, the time will have to be taken when he would otherwise be asleep.

Harold Shryock, M.D., *Happiness and Health*, p. 218

Determination and Effort Don't Help

Insomnia is one of the most distressing ailments from which anyone can suffer. The chief reason for this is that sleep is something that must take hold of you. There is no guaranteed natural way of your taking hold of sleep just when you want it. This is frustrating indeed. Second, insomnia is distressing because it inevitably brings waves of emotional upset to the persons who long for unconsciousness – and know that they'll feel dead tomorrow if they don't find it!

Part of the cure for insomnia is knowing the facts about it. The first fact is: “there’s little evidence that chronic insomnia takes any physical toll.”¹ (2) So long as people rest in bed the greater part of eight hours, they will be able to function adequately next day whether they sleep or not – provided their resting hours were not spent in an emotional furor. (3) Almost always nature restores the lost sleep on the successive night. Repeated bad nights without the intermission of good sleep are very rare indeed, and even these may not be distressing if one refuses to unnecessarily worry about the problem. (4) Rest is a little sleep. Rest itself is repair. Most people who think they are not sleeping at all do have short interludes of sleep. Even if they do not, just being supine and relaxed brings most of the benefits of unconsciousness. (5) “Physical causes of insomnia are comparatively few.”² Chronic pain is one of those rare causes. Heart and lung problems also constitute physical causes of delayed or interrupted sleep. Heavy evening meals and coffee or tea – even at midday – are much more common triggers.

In the vast majority of cases, insomnia results from overactivity of the nervous system, brain, or emotions. Depression, which is often the sign of some great loss, particularly the loss of love, in some instances springs from a chemical deficiency, and can be a prominent cause of insomnia, but far more often the life-style is the key.

If you are an introvert rather than an extrovert; an ectomorph rather than a mesomorph or endomorph; you are more likely to suffer from insomnia.

Excessive Tension Brings Insomnia

If, in the words of Scripture, you are "righteous over much" (Ec 7:16), that is, unduly conscientious about details, you are also set up for insomnia. In the *Harvard Medical School Health Letter Book* we read:

> There are some people who are constantly more alert than others. They tend to be sensitive individuals, often perfectionists who ruminate about details long after the event. Some of them take a long time to 'wind down' each night. They often take a while to fall asleep, but usually sleep soundly once they do. They manifest particular electrical properties of the nervous system and their condition is known as 'hyperarousal.'³
Excessive stresses, particularly those that bring on worry, provoke insomnia. The great statistician, Roger Babson, said it was a rule in his house “to say nothing negative after sundown.” That’s an excellent rule. In every home it should become the law. Otherwise an excessive price will be paid just for the folly of venting one’s emotions, or dwelling upon one’s fears.

"... Do not let the sun go down while you are still angry, and do not give the devil a foothold" (Eph 4:26, 27, NIV) is how the apostle Paul words the same advice. God gives us a hint by gradually drawing the shades of evening as a signal that we should begin to taper off in the intensity of our living after sundown. As a rule, the labor of the day should not be prolonged into the evening.

Sleep does not overtake us until we are relaxed in body and mind. Therefore the best approach to the sleep problem is indirect. If you strain for sleep directly it will avoid you. C. S. Lewis likened sleep to a coy maiden who flees when courted, but runs to one if ignored. To be overanxious about sleeping is the sure way to insomnia. Therefore, seek the route of indirection.

Whatever helps one relax physically and mentally contributes towards sleep – with one exception. It is not wise to nap late in the day. Rests taken during the day should as a rule be at least five or six hours away from the hour of final retirement. To relax the body it is necessary to exercise. Only muscles that have been physically taxed can properly let go. But the mind works differently. Too heavy a process of concentration over hours will leave the mind keyed up and tense. Therefore, for most of us, mental taxation should cease before the evening.

The night reflects the day to a great degree. A tense day will usually result in a tense night. A day lived sanely with due proportion of work and rest, concentration and relaxation, regular duties and change – above all permeated by the quiet joy and trust that is the Christian's birthright – prepares for sleep.

Practical Strategies for Insomniacs

There are some emergency strategies which may be used, though again it should be emphasized that the very sensing of an “emergency” tends to make sleep flee. Listening to music through earphones from a tape recorder, or Scripture on cassette, can often induce relaxation. Others are helped by a warm milk drink just before retiring. Tryptophan is a noted “relaxer” and is plentiful in milk. Similarly, if the last meal is mainly carbohydrate rather than heavily protein, sleep comes more easily. If one is awake for a long time during the night, eating one or two pieces of bread can prompt sleep back again (provided you do not have to journey too far to get the bread!) The reciting of such Scriptures as Psalms 23 can also promote the peace of mind so essential for relaxation.

If worst comes to worst, resolve you will rest your eight hours in bed without fretting, secure in the awareness that when the body and mind need sleep most they will take it. Nature has been caring for that procedure for millennia, and not one of us can change it. When tempted to anxiety over sleep's tarrying say: "I cannot force sleep to come, but I can lie heavy and relaxed, and let my mind dwell on Scripture promises, or happy memories or prospects. Then it is in my heavenly Father's hands, and it is written 'He giveth his beloved sleep.'" Because rest itself is a little sleep, this attitude will guarantee your being able to cope with the next day’s duties, however meager your time of unconsciousness. Ultimately, the sleep problem is self-limiting. Nature takes over the cure provided we do not attempt to cheat her by chemical methods, or a furious life-style.

SUMMARY

There's little evidence that chronic insomnia takes any physical toll.

Every rest is a minisleep whether we become unconscious or not. It is the worry about not sleeping that does much more damage than wakefulness.

Sleep is dependent upon relaxation of body and mind. Tension is the great enemy of sleep, particularly emotional tension. Abundant physical exercise and temperate habits in general, and faith in God are the best helps for sleep.

In most cases the night reflects the day. If the day has been excessively tense and busy, the night will also be tense. A certain amount of monotony in every day is necessary for a relaxed mind at evening.

Say nothing negative after sundown if you wish to sleep like a child.

Sleeping pills are not a long-term remedy for insomnia. Only a change of habits is.

REFERENCES
1. Textbook of Medicine, by Beesom and McDermott, p. 553.
2. Ibid., p. 553.
CHAPTER 24
Mr. and Mrs. Four Eyes

The eyes are just as dependent upon nutrition and blood circulation as any other part of the body, perhaps more so. Whatever is conducive to the health of the person as a whole aids eye health. Our Creator never intended that we should be spending many hours at close work. Therefore, we should exercise the greatest care in our habitual eye habits.

* * * *

"The eye is the lamp of the body. So, if your eye is sound, your whole body will be full of light; but if your eye is not sound, your whole body will be full of darkness."

Matthew 6:22 RSV

* * * *

Your eyes will see the king in his beauty; they will behold a land that stretches afar.

Isaiah 33: 17 RSV

* * * *

A Myopic Age

For health, happiness, and efficiency, look well to whatever you do constantly. Examine closely your habits in connection with those activities which occupy large proportions of your time, for example, reading or similar close activities.

For many people, the eyes use about one-quarter of the body's nervous energies. Nervous pursuits are in and of themselves tiring, and the utmost care must be exercised that habitual activities are done the best way. Let us therefore consider our eye habits.

In the Garden of Eden the books of Adam and Eve were trees, brooks, stones, stars, and animals. Their great Teacher was their heavenly Father. There was no likelihood of our first parents sitting in confined spaces with head bent, brows furrowed, for hours at a time staring at black marks on a white background. Their eyes continually roved far off encompassing the whole broad landscape, and the atmospheric heavens.

Nearsightedness, according to some researchers, is becoming almost epidemic in our western society, and for many it may be a by-product of our culture. It is much less common in unindustrialized nations. The classic controversy as to the causes of myopia is not yet settled. As in many such cases, the solution may not be that of either end of the spectrum. Ophthalmologists stress more the inherited nature of myopia, but some current writers are suggesting that inherited long eyeballs affect only a few percent of the population, whereas myopia afflicts much larger numbers after exposure to years of close work.

Hans Selye has written a very cordial endorsement of the work of Neville S. Cohen and Joseph L. Shapiro entitled Out of Sight – Into Vision. This book, like many others printed in recent years, suggests that nearsightedness, in a large number of cases, is caused by environments which enforce close visual activity. Cohen and Shapiro and others point to the work of researchers Francis A. Young and William Baldwin who found startling differences between Alaskan generations. Parents and grandparents who had been unschooled hunters and trappers on the vast open tundras were almost all farsighted and showed virtually no myopia, but the current generation of Eskimo children, required by the state to attend school regularly, were found to be myopic in 58 percent of cases.

Other writers such as Dr. Harris Gruman, Drs. Walter J. Zinn and Herbert Solomon point also to such phenomena as the myopia developed by submarine crews, and the Annapolis Syndrome. The latter reported on by the Journal of Ophthalmology tells of U.S. naval academy graduates made nearsighted by their years of study. Dr. R. A. Kraskin, in his book You Can Improve Your Vision, speaks of the statewide study of 160,000 children in Texas schools which showed that 20 percent had vision problems by the time they finished the first grade whereas 40 percent had them by the age of nine. According to Kraskin, less than 2¼ percent of infants start life with defective eyes.

It must be emphasized that there are poverty-stricken illiterates who are also myopic. It would be quite inaccurate to suggest that all myopia is the result of faulty environment, but the disproportionate number of cases found in submarine crews, school children, and those exposed to close eye work for years suggests that our modern way of life does have significant influence on eye health.

For us who live in cities, as more than two-thirds of people in the western world do, our sight is often circumscribed for long periods. Walking in city streets we can see no sweeping landscape. Standing or sitting in factories or offices, the range of vision is often just several feet. The student focuses on his book and too rarely even looks up. All this is ultimately devastating to our faculty of vision and affects our general health.

One hundred million Americans either use or should use glasses. About the age of 45 most people become aware of presbyopia – the effects of aging upon eye focusing. At this time the book is held further away, and when weariness comes the page becomes fuzzy. This is the time when most feel obliged to get glasses if they have not already done so.

General Health Fosters Eye Health

As the body as a whole is dependent upon exercise, so it is with the eye. We are not referring to the specific eye exercises of Dr. Bates and his followers, but to general physical movement by the whole person. As the body depends for its health on the quality of its nutrition, so with the eye. Those who exercise regularly and vigorously guarantee a good circulation of blood and nutrients to the vision centers. Their nervous systems will be in tune with the rest of their organism, and not likely to react
adversely to temperate habits of close work such as study. But there are right and wrong ways of studying, and it is vital to know which is which.

The prolonged focusing of the eyes on print, the restricted range of eye movement in the unnatural environment of an artificially lighted small room creates stress; and if prolonged month after month, ultimately leads to a measure of unnatural fatigue and even disease. By visually shrinking the world and surrendering muscle freedom, by superficial breathing, the student creates an environment unfavorable to health. If the desk is flat, rather than tilted, and placed against a wall so that the raised eyes are circumscribed in their view; and if the lighting causes strain because of either its excessive dimness or glare, ultimately the body will protest. We were not made to sit for long periods in boxes we call rooms, away from the sunlight and natural breezes, and a distant landscape of land and sky.

The wise person will choose to sit where he or she can have a view of the world outside, and not just the limits of a room. If it is possible to work by natural lighting, that is the ideal. All artificial light divides what God has put together. Fluorescent lights are the worst offenders and often lead to eyestrain, and sometimes to headache. About 17 percent of people are allergic to fluorescent light, according to Julian Huxley who wrote The Art of Seeing out of his own experience with visual problems. Remember that light is as much a food for the body as bread for the stomach, and air for the lungs. Entering through the eye, it stimulates the functioning of the pineal gland, which subsequently influences the pituitary, and all other glands of the body. Without adequate natural light it is difficult to remain serene in mind. Alaska, with its months of darkness, is well known for its high rate of depression among its inhabitants, and elevated toll of suicide.

Never look down at a book, or do other close work, for more than a few minutes at a time. Frequently change focus, preferably to look through the window at something far off – a distant falcon, or portion of a tree. And never sit for more than about forty minutes. Get up and move around. Take some deep breaths, swing your arms, stretch, yawn, and generally mentally relax. It is a wise person who rests before becoming tired. This decreases the length of time required for restoration.

In this industrialized world we have become accustomed to much eye abuse, and we pay for our lack of concern with limited vision, headache, and reduced vitality – all unnecessarily.

Most of us can do close work for years without damage if it is done according to the principles suggested above. Do not try to emulate Dr. Manette, of Dickens’ A Tale of Two Cities, who was so long incarcerated in his prison cell that any wider sphere brought fear. Rather spend much time under the open heavens exclaiming with Solomon “Truly the light is sweet, and a pleasant thing it is for the eyes to behold the sun” (Ec 11:7).

**SUMMARY**

About half of all Americans need or have glasses. Many are born nearsighted, others seem to develop it by emphasis upon close visual activities.

By about forty-five years of age most people become aware of presbyopia – reduced capacity to focus the eyes.

One should never do constant close work without rest and change of focusing. Daylight is better than electric light, and fluorescent lighting is the worst of all, unless it is of the variety specially prepared to provide the complete spectrum.

The eyes, like every other organ of the body, are dependent upon nourishment and circulation; nourishment resulting from correct nutrition, and circulation of the blood promoted by vigorous exercise.

Most city dwellers are confined to circumscribed vision rather than rejoicing in distant landscapes.

Prolonged focusing of the eyes upon print or other minute work creates stress and fatigue.

Be fussy about the artificial lights that you permit in your working place.

Those who see little of natural light frequently suffer from depression.
Most aging is not chronological but physiological. Next to faith in God, the best antiaging pill is physical and mental activity.

... the resurrection of the body: a doctrine which now-a-days is very soft pedalled by nearly all the faithful – to our great impoverishment. Not that you and I have now much reason to rejoice in having bodies! Like old automobiles, aren't they? where all sorts of apparently different things keep going wrong, but what they add up to is the plain fact that the machine is wearing out. Well, it was not meant to last forever. Still, I have a kindly feeling for the old rattle-trap. Through it God showed me that whole side of His beauty which is embodied in colour, sound, smell and size. No doubt it has often led me astray: but not half so often, I suspect, as my soul has led it astray. For the spiritual evils which we share with the devils (pride, spite) are far worse than what we share with the beasts: and sensuality really arises more from the imagination than from the appetites.

C. S. Lewis, Letters To An American Lady, pp. 110-111.

The Best Antiaging Pill

Years ago the young were an increasing majority in society. Today the trend is otherwise. The proportion of people sixty years of age and older is steadily increasing in the Western world, but it is also true that an increasing number of such people are existing rather than living. To prevent that tragedy and to reverse it for some, we offer some suggestions that may be worth more than a million to you.

It is not true that inability to use the body is the inevitable result of aging. More often it is the failure to use regularly one's physical abilities that leads to premature old age. Nonuse amounts to abuse. To fail to use one's limbs is the quickest route to inability to use them.

The very best antiaging pill known is physical activity. We do not mean that the elderly should necessarily begin a course of jogging or any other activity which strongly contrasts with their prior pursuits. All that is needed is the habit of regular walking at a brisk pace for at least thirty minutes to one hour a day. Such a habit would be worth more than all the medicines doctors can prescribe.

Francis Bacon said long ago: "Men of age object too much, consult too long, adventure too little, repent too soon and seldom drive business home to the full period, but content themselves with a mediocrity of success." All of which is true as to the tendencies of most elderly folk. But the very awareness of these truths can be a protection against the faults indicated. Aristotle, long before Bacon, said something similar. He affirmed: "The old are positive about nothing; in all things they err by an extreme moderation."

Often vices are virtues taken to an extreme. A generous person can easily become a spendthrift and an economical soul can become a miser. The fact is, as Scripture affirms, the youth are intended by nature for aggressive activities, whereas the aged shine more in the realm of wise counsel. But recognition of this essential difference between youth and age should not lead to

Excessive Stillness Is the Preliminary to Death

It is a well-recognized fact that lying in bed for more than a day or two leads to demineralization of the bones and decreased physical strength. On the other hand, as soon as one rises from a sickbed and pursues the normal moderate activities within the home or business, strength is recuperated. Exercise intensifies such benefits.

We all recognize that everybody wishes to live a long time but nobody wishes to be old. The answer to that phenomenon is daily exercise. Forgive our repetition of this truth, but it should be burned into every mind over forty years of age: Most of the signs that are interpreted as signs of old age are actually the signs of inactivity!

True, there are biological accompaniments of advancing years. The very old have usually lost an inch of height, their hair has thinned, their skin has become wrinkled and perhaps blotched, their lungs have shrunk, and the kidneys and heart no longer can do the quantity of processing of fluids easily managed in earlier years. The fat content of the body usually increases proportionately with age and blood pressure rises. Joints stiffen, reflexes decrease in ability, and teeth are lost. But to a considerable degree several of these symptoms can be lessened in severity by the simple procedures of eating right and moving often. It is not necessary that existence for the elderly should be a pathetic attempt to kill time before time kills them. Scripture promises to the faithful: "As thy days so shall thy strength be." Moses' strength was unabated at 120 and Caleb's in his 80s.

According to De Quincey, the poet Wordsworth averaged nearly ten miles a day of walking for sixty years. Certainly he lived a long time (into his eighties) and the quality of his life is reflected in his immortal poetry. For examples of contemporaries who have done similarly, read the books of Kenneth Cooper and Nathan Pritikin. Best of all, experiment for yourself, beginning with very brief and moderate activity, but gradually increasing your energy expenditure both quantitatively and qualitatively.
Consider the words of Dr. J. P. Hrachovec, a specialist in gerontology (aging):

It is not that old men sit around most of the time, it is that sitting around ages men before their time. Only recently at the USC Gerontology Research Center, Dr. Herbert A. DeVries, Professor of Physiology at the University of Southern California, pointed out that the changes in function of various organs in the human body that we associate with age are very similar to the changes that can be produced in young men simply by keeping them inactive. Dr. DeVries reported that increased physical activity alone without any other therapeutic procedure reversed the aging process and over a period of time restored the characteristics of youth to the bodies of middle-aged men.

... Our bodies thrive on exercise. Even the body's ability to carry oxygen from the air to its tissues, probably the best measure of vigor that we have and obviously one of our most vital life lines, was significantly improved. It is encouraging to note that older men were as able to achieve similar percentages of improvements by exercise as young men. Dr. DeVries's results suggest that a proper regimen of exercise also relieves nervous tension, reduces joint stiffness, lessens the fatigue level resulting from a day's work, lowers the blood pressure, and reduces the amount of fat in the body tissues. It acts like a miracle drug, and it's free for the doing.

In other words, the less you exercise, the less you are capable of physical activity. No matter what a person's age, exercise should be a part of his daily life.

An 80-year-old man, if he wants to live to be 90, needs to exercise. A 90-year-old woman, if she wants to live to 100, had better keep exercising.¹

We are indeed fearfully and wonderfully made. The human body is so durable that it is usually decades before it protests against popular forms of abuse. Cancer, heart disease, and most diabetes, take about twenty or thirty years to develop.

Rejuvenation Is Possible.

Even after abuse the body will demonstrate its resilience if we turn to better habits. Note this well: half of the decline experienced between thirty and seventy is not natural aging, but disuse. The habit of regular daily exercise by middle-aged and older people can turn the clock back by as much as ten to twenty-five years. No matter when in life people turn their backs on their former sedentary ways and begin to be much more active, great improvements can occur. Just half an hour's vigorous walking a day for many people could result in an added ten years of life, and better quality life as well.

All should read the case histories given by Nathan Pritikin in The Pritikin Promise. Many not connected with the Pritikin organization have testified to the accuracy of such accounts. It has been overwhelmingly demonstrated that people of advanced years in poor health can experience a transformation, if they will but look to their life-style and make the necessary changes. Those who turn to an unrefined diet, and exercise daily, have found the key to health.

Have you ever heard of the great Cornaro? He certainly was not great when near death at the age of forty. This Venetian nobleman, having lived not wisely but too well, resolved to change his ways. He leaves his historians given by Nathan Pritikin in The Pritikin Promise. Many not connected with the Pritikin organization have testified to the accuracy of such accounts. It has been overwhelmingly demonstrated that people of advanced years in poor health can experience a transformation, if they will but look to their life-style and make the necessary changes. Those who turn to an unrefined diet, and exercise daily, have found the key to health.

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Cornaro drastically changed his eating and drinking habits emphasizing less rather than more, and simple rather than complex, foods. He wrote the famous book, How to Regain Health and Live a Hundred Years, by One Who Did It. Thus, this old Venetian gentleman became a testimony to the fact that nature is long-suffering, and if one repents of folly even after decades, marvels can be accomplished. To quote the title of another old book, It's Never Too Late to Mend.

One of the great words of the Christian faith is "hope". Because ours is a miracle-working, compassionate Savior, there are never grounds for despair. Often when people learn for the first time the folly of their previous habits of life, they are tempted to continue as they have been doing on the excuse that it's too late to mend. But this need never be the case.

The human body is so marvelously made that reformation of physical habits immediately begins to have effect. When men in their forties, fifties, or sixties, switch to cholesterol-lowering diets, they almost inevitably experience benefit – benefit which in some cases will prolong their lives by a decade or more. Those who have been sedentary can have similar results by learning to walk vigorously and often. But can anything be done about diseases induced by decades of wrong living? Yes!

As regards the chief killer – cardiovascular disease – consider the words of Dr. J.B. Taylor, writing over twenty years ago in the Illinois Medical Journal: "All the evidence available is contrary to this defeatist concept that atherosclerosis is a 'one-way' or irreversible process."

It has long been known from autopsies that in patients who died from wasting diseases, the artery blockage was frequently "resorbed." For large numbers who were long in concentration camps, autopsies showed that their arteries were clear of atheroma – in some cases revealing "hollows" where earlier there had been atherosclerotic blockage.

After referring to the discoveries of certain pathologists in his excellent volume Heart Attack – Are You a Candidate?, author Arthur Blumenfeld writes:
These pathologists have no doubt about reversibility. Consequently, three phases should be considered in a prevention program:

1. **REVERSAL**: Dissolving part of the fatty fibrous growths already blocking our arteries.
2. **STATUS QUO**: Prevention of any further extension of deposits of blockage.
3. **PREVENTION** of Coronary Thrombosis: By preventing the excess blockage usually required for this disaster, and by reducing excess blood lipids which increase the thrombotic factors in blood.

### The Pritikin Program

While the Pritikin program may seem too demanding for healthy, vigorous people, there can be no denying its effectiveness for many who formerly seemed at the end of their days of vitality. For example, famous astronaut Colonel James B. Irwin had two heart attacks and triple bypass surgery before, under the guidance of Nathan Pritikin, he began to attend to his diet and exercise habits. Subsequently he wrote:

> I enjoy life as I never have before. I still go down to Houston; they encourage me to come down for an annual physical. The doctors are amazed at the results. My weight dropped: I'm thirty pounds lighter than when I made the flight to the moon. My blood pressure is lower than it was when I graduated from high school. I don't have hypertension any more and my cholesterol is gradually coming down – it was 300 when I had the first heart attack and 320 at the second. When I was down there last January, the doctor said, "Jim, this program is good for you – it's working. If we didn't have the evidence that you had a bypass surgery and two heart attacks, we'd say you are in better condition than any of the astronauts in the program."

The same book has many such examples, some even more striking.

Here is one:

**EMILY M. HELLER** – Livonia, Michigan, age 74.

"You have made it possible for me to 'live as I wish,' since November 1976 when I first went on your program. I had been feeling pretty well, but a year prior to that date I was hospitalized for shortness of breath which the doctors called 'coronary insufficiency.' My doctor spoke of a bypass operation, but I said 'no thanks!' Fortunately the cardiologist suggested I was past the GOLDEN AGE for that procedure and suggested trying medication only. During the next twelve months I felt disbelief, then finally doubt and despair. I developed allergies to some of the drugs – Isordil, Inderal, Coumadin, Nitros when needed, then substituted by Nitrol. My whole body, inside and outside, tickled and pricked with no relief except when sleeping. I became allergic to almost all medication except Bufferin, which was forbidden because of the Coumadin. I developed two bladder tumors which had to be removed.

"While at the Center, I gradually stopped all medication. My walking was slowly increased from one block the first day to 5 miles the last week divided into several walks each day.

"Almost immediately all of my former bouncing energy returned, and I felt marvelous again. I loved everyone around me ..."

"I do not experience depression or tiredness. I am very happy most of the time and I have terrific energy from 7:30 A.M. to 11 P.M. when I call it a day. I walk approximately three miles five days each week, sometimes dividing it into two walks, do all of our housework, cooking, some garden work, shopping, driving every day, work in my husband's dental office as accountant and part-time receptionist, am active in a local P.E.O. Chapter and several small clubs. On September 25th I will reach my 74th birthday, and – I am still involved in two love affairs – one with my husband George of 44 years, and the other with Life. I am still 'in love with life,' and I know life 'is still in love with me.'"

For some sufferers the McDougall Plan is even more effective. (See our Recommended Reading list.)

What others have done, you can do. Be of good cheer. "With God all things are possible" (Mt 19:26).

### SUMMARY

The human body is so durable it is usually decades before it protests against popular forms of abuse. Cancer, heart disease, and nine-tenths of diabetes take about twenty or so years to develop.

Even after abuse the body will demonstrate its resilience if we turn to better habits.

Half of the decline experienced between thirty and seventy years of age is not natural aging but disuse.

The best antiaging pill is exercise. Many at an advanced age have turned back the clock by changing to strictly temperate habits.

Even atherosclerosis is capable of a degree of reversal.

Whatever one's age, a degree of benefit can be secured by turning to right habits.

### REFERENCES

CHAPTER 26
To Test or Not to Test

Medical tests are multiplying and many are used for the protection, not of the patient, but of the physician. Safety is only possible for those who know the inadequacies as well as the values of popular medical tests.

* * *

It has long been recognized that medicine has the potential for doing harm as well as good. What is not commonly recognized, however, is that the potential for both harm and good has increased as medical science and medical technology have progressed.

... many diagnostic tests are done despite an overwhelming probability that the results will not be helpful to the patient.

Dr. Eugene D. Robin, Medical Care Can Be Dangerous To Your Health, pp. 6, 2.

* * *

Our Technology Is Not Infallible

It was in this century that the diagnostic technology of chest X rays was introduced. In the 1930s it was considered precise and accurate. Only in the 1940s after World War II was it discovered that in making X-ray interpretations:

... in one out of three cases the physician would not only disagree with a second or third 'reader' but in 20 percent of the cases would not even agree with himself. That is to say, when confronted on two different occasions with the same pair of x-ray films, he would give diametrically opposing answers. Yet it was on this supposedly 'decisive' technology that decisions radically affecting the lives of people were made.¹

About the same time there was a serologic diagnostic test for syphilis. Of all those people yielding positive reactions, only one-half were actually syphilitic.

Quite aside from the mental anguish brought on by a diagnosis of syphilis, the antisypililitic treatment of the time carried considerable risk for those thousands of people, not the least of them the fact (discovered even later) that the treatment was an important source of hepatitis. These four or five decades, during which thousands of patients who did not have syphilis were subjected to the shame and dangers of antisypililitic therapy, are not from the medical era of bleedings and leeches, but from the modern era of interventionist technology.²

These two illustrations make it clear that medical testing is not, and never has been, an infallible appraisal of the facts of personal health. In an age when NASA moon specialists are capable of error, as demonstrated in the tragic loss of seven astronauts, we should be cautious about granting infallibility to medical testing. While many medical tests are valuable in diagnosis, including those for blood pressure, which can help prevent fatal strokes, and cholesterol tests, which may help prevent death by coronary infarction – there are many other factors to be taken into account. It is a fact that many medical tests are not fully accurate. Some tests involve significant risk. Medical testing is very profitable, which is an incentive for physicians to order them. Another strong incentive is the pursuit of defensive medicine – physicians covering all possible angles in case of a lawsuit. These and other factors make worthwhile our investigating further the issue of medical tests.

First of all, doctors cannot order tests without permission of the patient. By law, the doctor is required to obtain a signed statement of the patient's consent for any test that involves a significant risk. And that consent should be an informed consent as a result of the doctor giving all the necessary information for making a decision. However, doctors also are legally required to explain to the patient the possible consequences of refusing to have such tests.

We should remember also that doctors have been forced by laypeople and by legal professionals to practice defensive medicine. This means they will often order more tests than they otherwise would, because of the possibility of being sued. And some of these tests are very expensive indeed. Before giving his consent, the patient would often be wise to get a second or a third opinion about the necessity of the test or tests, unless he has absolute confidence in the capability of the original doctor.

Unnecessary tests not only are a waste of money but also expose you to unnecessary discomfort, inconvenience, and risk. Some investigators believe that as many as 9% of all tests are performed by doctors to protect themselves from the threat of malpractice suits. An American Medical Association Survey revealed that at least three out of every four doctors admitted ordering tests for the sole purpose of having a better defense in the event of a subsequent malpractice trial.³

This statement may not be entirely consistent. If three out of every four doctors admit to ordering tests for the sole purpose of having a good defense in a lawsuit, the percentage of unnecessary tests is probably much higher than 9 percent.

Unnecessary tests may also be ordered because they are profitable. In general, doctors are not paid for their time, but rather for what they do. That is, many doctors earn more by ordering tests or performing procedures than by taking the same amount of time to question, examine, counsel, or think about a patient's problem.⁴

Obviously, conscientious doctors, who are the great majority, are not guilty of such practices. But others are. Also keep the following in mind:

... extensive screening can create more problems than it detects. For example, most normal values for blood and urine tests are designed so that 95% of healthy people will receive normal results. This means that for each test done 5% of healthy people will receive "abnormal" or "borderline" results. So, if you have twelve separate tests performed, you stand about a 50% chance of having an "abnormal" result – even if you are perfectly healthy. Most of these falsely
Many are the medical voices sounding similar warnings. The warnings do not for a moment imply that medical tests are to be shunned, but only that they should be used with considerable caution and only when there is more to gain than to lose. Dr. Donald M. Vickery says:

The risks of screening procedures are often dismissed as of no consequence. Do not let anyone sell you a screening procedure on the basis that even if it does no good, it does no harm. Screening procedures can harm you in at least four ways:

It should be clear by now that the risk of false positive laboratory tests is high. Accepting such a test as proof of a disease obviously has great potential for harm by exposing you to the hazards of unnecessary treatment or by labeling you as "diseased" when you are not. Moreover, the attempt to prove that an abnormal laboratory test is just a false positive may be costly, inconvenient, and a danger to your health.

Diagnostic tests do have inherent dangers. There really is radiation in those x-rays and, once in a great while, people really do have heart attacks during uncomfortable, stressful tests.

Screening programs may have side effects not directly related to the test used.

They cost money. And even if they did cost only money, they still would be unacceptable. Money spent on the useless cannot be spent on the useful.

Elsewhere in the same volume the doctor sounds a very necessary statistical caution which is the more needed when we remember that many doctors are no more versed in certain of the enigmas of statistics than their patients. Here are Vickery’s words cautioning against multiphasic screening:

Recall that an excellent laboratory test would only have five percent false positives; this means that out of 100 persons who did not have the disease, only five would have a positive test. Many tests are in fact defined to have just such a specificity. The normal values of many blood tests are derived by giving the test to a large number of "normal" persons (usually college students) and then setting normal values for the test so that five percent of these values fall into the "abnormal" category. By definition then, five percent of the persons who are actually normal will have the "abnormal" result. If you are normal, you have a five percent chance of having an abnormal result on anyone of these tests. But what happens if you have many such tests? What are the chances that you will go through the entire multiphasic screening procedure and have completely normal results? If there are 25 tests and each has a specificity of 95 percent, your chances of having an "abnormal" result are about three out of four.

In Jane Brody's Guide to Personal Health, we find the identical idea stated as follows:

Dr. Mike Oppenheim, a Los Angeles general practitioner writing in Woman's Day, cautions against having a battery of tests (such as in a multiphasic health screening program) without first consulting a physician. Too often – Dr. Oppenheim estimates 5 percent of cases – the test battery turns up one or more falsely abnormal results that set in motion a chain of further tests, needlessly alarm the patient, and add to the cost of medical care.

Even the best of medical laboratories sometimes make mistakes, or an error may be made in collecting the specimen, or some other unusual circumstance may have skewed the result.

Test results can be distorted by diet (that is why some are done only after an eight-hour fast), vigorous exercise, over-the-counter and prescription drugs (including aspirin, vitamins, and birth control pills), alcohol, lack of sleep, stress, fear, or anxiety.

In view of these things, which every informed doctor acknowledges, the patient needs to learn to ask the doctor what alternatives can be suggested. If the results of earlier tests are available they should be given to the examining physician. Sometimes an alternative method of testing has considerably less risk than the one proposed. This is true wherever ultrasound can be used instead of X rays.

Don't Rush to the Doctor for Trivial Problems

Remember that the majority of illnesses are self-limiting. That is, they are cured by nature in time. Professional practitioners usually get the credit for what nature does. Even when placebos are given, healings take place. Therefore, often the very best test is that of time. One should not rush to the doctor for trivial things. Almost everybody has occasional symptoms that give distress but which mean little. This is not to suggest that vital signs, such as indications of cancer, should ever be ignored. To be human is to inhabit an imperfect body, or to possess an imperfect mind. Both body and mind are subject to all sorts of fluctuations of function according to the weather, our diet, and our experiences. But the marvel of the body is that in its wisdom it restores homeostasis usually in a short period after some temporary aberration.

Suppose you have had the test or tests done. You should keep in mind the fact that no test is fully accurate. Blood pressure results are notorious for their changeability, and anyone who makes a decision from a single test may be questioned as to his wisdom. There are some who have been made falsely confident of their state of health by a false-negative report. And there are others who have been greatly disturbed by a false-positive. Where the issue is a grave one, complete dependence should not be put upon any single test. Never forget that a very good test has a sensitivity of about 90 percent, but that means that 10 percent of people with the problem will not be rightly diagnosed by that test. And similarly, 10 percent of people who do not have the disease will be diagnosed as having it. Usually the rarer the disease, the greater the likelihood of an unusual result, a false positive. Don't be upset if you find this puzzling. A recent study of doctors in a leading medical center concluded that less than one in five were able to correctly apply the concept of predictive value.
We wish to emphasize that we are not hitting at the medical establishment when we write what is so well known to most of the practitioners in that establishment. Mankind has a tendency to worship its gods, and when we give that status to anything or anyone less than the Creator, we are being Pollyannas as well as idolaters. It was wisdom given by God that resulted in most of those medical tests being used today that have proved their worth. But unless we keep in mind the inevitable fallibility of all things human, we may often be disturbed unnecessarily or fail to be disturbed where we should be.

The plain truth is that in this matter of medical tests some abnormalities are only statistical flukes. Furthermore, for some tests normal values vary considerably from laboratory to laboratory, depending upon methods used. Then there are other factors that affect the test results, including sometimes one's diet, or the use of drugs, and how active one has been prior to the test. Certainly emotional stress can have a great impact upon tests, particularly blood pressure and cholesterol measurements. Even the time of day has its influence. It is also true that some tests do not have a mathematical mode of interpretation and require subjective decisions. Even today, in the reading of chest X-rays there is a wide variety of disagreement among experienced radiologists. Some researchers have concluded that in this field "an error rate in interpretation of approximately 30 percent is unavoidable."9

Medical Tests Can Make Up to Half Your Bill

Today the tests of modern medical technology cost nearly one-half of our total health-care bill. It is wise to work out in advance just how much your tests are going to cost you. Not all doctors can estimate them reliably.

We conclude, as do many others, that medical tests can be a tremendous blessing and save lives, but in other instances they can be either unnecessary or actually harmful.

In case you are tempted to think we have been unduly skeptical in this chapter about procedures most folks take for granted as absolutely reliable, we leave with you the careful comments of Dr. Eugene D. Robin, currently professor of medicine and physiology at Stanford University and formerly of the faculty of the Harvard Medical School and the University of Pittsburgh Medical School. His first comment applies to medical procedures in general, not just tests, and the second to screening tests for those without symptoms:

With some notable exceptions, most of the medical interventions currently employed in normal subjects appear to have little favorable influence on health; many are untested and some are either harmful or have unacceptably high risks.

A growing number of doctors are challenging the value of health surveys in the normal (healthy) person on two grounds: Their inherent risks and the lack of evidence to prove their benefits.

Often diagnostic studies elicit the diagnosis GOK (God Only Knows). The failure to make a diagnosis in hospitalized patients is much more common than most physicians recognize.

... every test has the potential to cause harm; every test has its own inherent risks ... When false diagnosis leads to appropriate treatment, the patient may improve spontaneously despite the treatment; may be unaffected by the treatment; or may be harmed, or even die, as a result of the treatment.

As a patient, what can you do to avoid excessive testing? Try not to consult doctors for trivial matters. The risks of a needless visit to the doctor are greater than the risks of overlooking an important and treatable disease by staying away.10

Remember, knowledge in every field is usually like the coming in of the tide. You watch the wave, it rolls in, and then it recedes. But the next wave comes further up the beach though it recedes again. Because of human fallibility, we rarely get the whole of the truth at once. It takes repeated efforts and many years and many people before enough truth is apparent that researchers feel near the goal. This all applies to medicine's battles for true diagnosis. With our generation has come a revolution in testing techniques, but every such revolution is indeed like the tide with progress on the whole but also inevitable and frequent retardation and loss.

SUMMARY

Medical tests can be a great blessing, but they have for many people been a great evil.

Early X-ray interpretations were a dubious affair and some are still in that category. Almost all medical tests are characterized by fallibility. Some of them are even dangerous.

Because of the threat of malpractice suits, most doctors today order more tests than they otherwise would. Some of these are very expensive and some are dangerous.

Three out of every four doctors admit to ordering certain tests for the sole purpose of having a good defense in a lawsuit.

There is little value in having a test for a disease that cannot be cured by modern medicine even if discovered.

No test is fully accurate, not even blood pressure tests.

The rarer the disease, the greater the likelihood that an unusual result will be a false positive.

Only very good tests have a sensitivity of about 90 percent which means that 10 percent of people with the problem will not be rightly diagnosed, and that 10 percent of the people who don't have the disease will be diagnosed as having it.

In medical tests, some abnormalities are only statistical flukes. Never forget the careful comment of Dr. Eugene D. Robin, of Stanford: "With some noble exceptions, most medical interventions currently employed in normal subjects appear to have little favorable influence on health ..."
1. Doing Better and Feeling Worse, pp. 143, 144.
2. Ibid., p. 144.
3. The People’s Book of Medical Tests, p. 22.
4. Ibid., p. 22.
5. Ibid., pp. 22, 23.
CHAPTER 27
The Doctor Can Have It Tough Too

The physician’s golden era is over. Today, pressures from the government, insurance companies, lawyers, hospitals, nurses, and patients threaten to overwhelm even the most conscientious doctors. Many are planning an early retirement in consequence, while thousands who otherwise would have entered orthodox medical training have decided against it. A medical crisis is looming.

* * * *

A consultant friend arrived home from the hospital in a somewhat chastened mood. Being a patient for the first time was, to quote the jargon, a learning experience. An appendix which had grumbled for many years finally lost its temper and drove him into the arms of a surgical colleague with whom relations had been a trifle strained. My friend, to let you understand, has the unfortunate habit of voicing criticisms loudly and without undue restraint. His remarks, while no doubt well-intentioned, tend to arouse a variety of non-humanitarian emotions in the breast of his colleagues.

Few would ignore the chance to seek a little revenge. Needles tended to feel blunt; there were persistent difficulties in obtaining a bedpan; his companion in the double-bedded bay was deaf and snored loudly; and there seemed to be a surfeit of enemas. Most satisfied was his senior surgical associate. Just before the operation he explained to his patient that normally he left appendices to his juniors, but, in this case he would operate personally. My friend was wheeled into the theater but a moment before the anaesthetic mask was applied he heard a loud voice saying, "Refresh my memory, sister. Is the appendix on the right or the left hand side?"

"In England Now," The Lancet, October 11, 1986

* * * *

Physician, heal thyself.

Luke 4:23

* * * *

Is there no balm in Gilead? Is there no physician there? Why then has the health of the daughter of my people not been restored?

Jeremiah 8:22 RSV

* * * *

The Other Side of the Story

Most of us see the privileges of the other person without perceiving at the same time their handicaps or burdens. This is particularly true of most laypeople as they contemplate members of the medical professions. For example, it is taken for granted that most doctors are wealthy. Has not Newsweek recently recorded that physicians average $113,000 a year in earnings, and that at least a third of them receive the magazine Medical Economics which counsels its readers how to invest such surplus sums as $100,000 at a time? 1

On the other hand, the number of doctors who earn nearer to half that sum annually is legion, despite the fact that their working day may frequently be half as long again as that of most workers in America. Many of these are still paying off debts for their training, a training which included not only four stressful years at medical school, but also three to five more years of residency during which their position on the totem pole was hardly enviable.

In our complex age the medical profession suffers along with the rest of mankind from the increasing burdens created by high-tech business and bureaucracy. The freedom and independence of earlier decades has largely faded. Because of burgeoning health costs, doctors are more and more circumscribed by rules and red tape from a variety of sources. These include third-party payers such as Blue Cross-Blue Shield, Medicare and Medicaid. The diagnosis-related group system of hospital reimbursement is creating further restrictions and often makes doctors possible adversaries of their patients. One physician, speaking of the modern competitive medical market and its growing complexities and perplexities, declares:

"... it looks as though medicine will be increasingly practiced in board rooms and courtrooms and physicians will sally forth to do battle with one another armed with advertising and investment capital and protected by contracts and memberships in three-letter plans."

This rush toward what some have termed the "commercialization" of medicine and others have called "industrialization" of medicine has bewildered physicians...

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Malpractice Suits

Which layperson could long endure the constant threat of litigation faced by all practicing physicians? The average medical malpractice jury award in 1985 was $1,179,095. While in the seventies there were about three claims per year made upon each 100 physicians, by 1983 the figure was up to 20. This means that the equivalent of one physician in five was being sued each year. The public forgets that in the long run it pays for all the malpractice costs. Good physicians are often unfairly penalized because, while up to 25 percent of malpractice payments can result from the misbehavior of just 1 percent of the practicing physicians in a geographical area, all the local doctors carry the burden of the legal slur. A misguided sense of professional loyalty, which permits a tiny minority to escape with near murder, intensifies this burden. Across the nation in
1985 only 1 out of every 1,300 of this country's physicians had his or her medical license revoked, and only a slightly larger number were recipients of formal rebukes. The same Newsweek article, earlier cited, also reminds us, on page 63:

All human beings err. Few, however, work in occupations where errors can have catastrophic consequences. Society asks the impossible when it expects doctors never to make a mistake.

The threat of litigation involves much more than possible loss of money. It can change the doctor's whole approach to his work and to his patients. Many have made the decision to retire early because of such pressures. Constantly being engaged in defensive medicine lacks the joy and freedom valued so much by doctors in earlier decades.

More than most professional workers, physicians are prone to early heart attacks and strokes, alcoholism, drug dependency and suicide. Some of this is the result of medical privilege, but much of it is the unwanted fruit of medical pressures which can be enormous.

Depression Through Professional Failure

Many doctors suffer from the psychological burden of being engaged in work that through no fault of their own often fails. Brain surgery is notorious for this, but perhaps no more so than the large number of surgeons who have been practicing radical mastectomies for years. The long-range benefit in both cases in often only slight. Consider the impact of the reality alluded to in the following quotation from a Lancet article of just a few years ago:

The evidence that breast cancer is incurable is overwhelming. The philosophy of breast cancer screening is based on wishful thinking that early cancer is curable cancer, though no-one knows what is "early." Unable to admit ignorance and defeat, cancer propagandists have now turned to blaming the victims: they consume too much fat, they do not practice breast self-examination, they succumb to "irrational" fears and delay reporting the early symptoms. It would appear that no woman needs to die of breast cancer if she reads and heeds the leaflets of the cancer societies and has her breasts examined regularly. Adherence to these myths and avoidance of reality undermines the credibility of the medical profession with the public.

Put with this information that given us by an even more recent article:

We assessed the overall progress against cancer during the years 1950 to 1982. In the United States, these years were associated with increases in the number of deaths from cancer, in the crude cancer-related mortality rate, in the age-adjusted mortality rate, and in both the crude and the age-adjusted incidence rates, whereas reported survival rates (crude and relative) for cancer patients also increased.

In our view, the best single measure of progress against cancer is change in the age-adjusted mortality rate associated with all cancers combined in the total population. According to this measure, we are losing the war against cancer, notwithstanding progress against several uncommon forms of the disease, improvements in palliation, and extension of the productive years of life. A shift in research emphasis, from research on treatment to research on prevention, seems necessary if substantial progress against cancer is to be forthcoming.

Conventional medicine has long held that early diagnosis of cancer leads to early treatment and longer survival. Recently, however, several large trials of biannual chest X-ray screening (for early detection of lung cancer in Britain and the USA), produced survival rates in those found to have lung cancer that were nearly identical with those from controlled groups who were not screened.

Imagine the burden upon a conscientious doctor such realities bring. Much of his labor of mind, heart, and hand seems often to be in vain.

Then there is the impossible task of keeping up with the increasing medical knowledge in one's own field. It is quite Herculean even to touch the fringe of the results of modern research. Confesses Dr. David T. Durack:

Most of us feel weighed down by the heavy and increasing burden of medical reading. Our inevitable failure in the struggle "to keep up with the literature" often generates anxiety and guilt. We are all aware that the situation has worsened in the past few years, and that no respite can be expected in the future.

The Index Medicus surveys approximately 2,500 journals, and indexes about 250,000 articles per year. Actually, the complete number of biomedical periodicals in the world is more than 5,000, though nobody knows the precise figure. One editorial in The New England Journal of Medicine bore the heading, "Are We a Filter or a Sponge?"

Not least among the concerns of contemporary physicians is the deteriorating image the profession is experiencing. Let one specialist summarize:

No demonstration is needed to prove that the physician has found himself in a chillier climate of national opinion in recent years. Traditionally he was not only respected for his professional skills but beloved for his personal relationships with those for whom he cared. He was the accepted symbol of selfless devotion to duty. Today, he has undergone what often seems to him like systematic and studied deprecation. Beneath the rapturous platitudes about medicine which we regularly beguile ourselves, let us note a hard fact: many people now think of us as men concerned first with personal gain and only secondly with the welfare of the sick. Not only are we regarded in certain circles as venal, but to complete an ugly picture we are seen as smug, aloof from human suffering, too busy profiteering on illness to drive our Cadillacs out on house calls.

Yes, to be a conscientious physician means inevitably the carrying of very heavy burdens. This is more the case in our time than ever before because life, as well as medicine, is more complicated than ever before. Not many modern doctors would attempt to write the well-known essay entitled "I Am a Multi-millionaire!" that Dr. Daniel H. Kress published earlier this century, yet it is a demonstration that despite almost overwhelming pressures there is a guaranteed way of survival.
The Christian Physician Not Only Endures but Enjoys!

Dr. Kress had been told by one of his patients that another patient had pointed out the doctor to a sanitarium visitor and commented, "He is a millionaire." When Dr. Kress first heard the anecdote, he was amused in a somewhat whimsical manner. At that time he had a heavy mortgage on his home and less than $48 in the bank. But the more he meditated upon the incident, the more he became convinced that he was not only a millionaire but a multimillionaire. So at the age of seventy, Dr. Kress published what he called his "inventory." First and foremost he listed the fact that because of intemperance in labor and ignorance regarding nutrition he had nearly died at forty. This jolt gave him a new appreciation of health and an entirely new set of habits. As a result at the age of seventy he was accomplishing much more than at forty and enjoying it. Wrote Dr. Kress:

What would I take for the health I accumulated in those thirty years? Suppose some invalid should say, "Doctor, I will give you $1,000,000 for your health." There is many an invalid millionaire who would be glad to make just such an exchange! I would turn down the offer without giving it a second thought and say, "I am sorry, but my health is too valuable to sell for $1,000,000." 8

Next in his inventory the good doctor placed his wife as one who had stood by his side for over half a century, and who had nursed him back to life from the point of near death. Observe his words:

What would I take in exchange for my wife? One million dollars would be no temptation. Two or even five million would without a moment's hesitation be turned down. I would actually refuse to sell out for $6,000,000! I made the discovery that I was not merely a millionaire, but a multimillionaire. 9

Third on his inventory was a handicapped son who had fallen from his high chair as a baby receiving a head injury that caused partial paralysis and hindered proper maturation. Again listen to Dr. Kress:

He was one of the sweetest boys living. Everybody who knew him loved him, and he loved everybody. Whenever I went somewhere to give a lecture, it was always a comfort and an inspiration to know that that boy of mine was in the bedroom on his knees praying for me. I speak of him as a boy, although he was over thirty years of age. Would I turn down $1,000,000 if offered it for that boy? Twice that amount would not tempt me. That brings the valuation of my possessions up to over $8,000,000. 10

Next was listed the daughter of Dr. and Mrs. Kress estimated as worth at least several millions. Dr. Kress comments on the fact that his son-in-law, a doctor from the south, had not been aware at the time of the ceremony that he was marrying into a millionaire's family.

As we might expect, the writer included in his list the heavenly inheritance for all Christians which is incorruptible, undefiled, and which will never fade away. Notice now the climax of this Christian physician's testimony:

I am a rich poor man, while many a man reckoned as a millionaire of this world is really a poor rich man. When he comes to the close of life, he must leave all of his temporal possessions behind. What, we may ask, "shall it profit a man, if he shall gain the whole world, and lose his own soul?" (Mk 8:36)

It was once my painful duty to inform a millionaire patient of his hopeless condition. He told me that he came to this country from Ireland when a mere boy and that he had struggled along, working hard almost day and night, and finally he had attained great wealth, but at the sacrifice of health. Now he saw his folly, and looking sadly at me, said:

"Doctor, I have been a fool. Money! I hate the stuff. I am no better off than a tramp. I cannot eat any more than he can, and be comfortable. I cannot wear any more clothing. Of what good is my wealth?" Rich, but poor, he discovered himself to be.

We brought nothing into this world, and we can take nothing with us when we leave it. The real millionaires, it will some day be seen, are those who make first things first, who are rich in good works and have laid up their treasures in heaven; who seek first the kingdom of God and His righteousness. 11

I read that essay about thirty-five years ago and was greatly blessed by it. Both Drs. Kress (for Mrs. Kress also was a physician) lived and served well into their nineties, blessing untold thousands. Their story testifies to the fact that the most important truth about our pressures in life is not their quantity or quality but where they press us to – to Christ or away from him. The Christian physician, like all other physicians, lives and works amid tough and traumatic conditions continually. But Christian physicians have the privilege of casting all cares upon the great Physician who ever walks beside them (1 Pe 5:7). Should we not pray for all who seek to ease the burdens of their fellow humans, especially the privileged but pressured medical personnel of this troubled age? 12

SUMMARY

A new age has begun for physicians and it's a tough one.

The modern medical professional can be threatened by government, medical institutions, nurses, patients, lawyers, and his own overstrained nervous system.

Success in treating most chronic disease is almost nil and consequently the spiritual compensations which often accompany gargantuan tasks are frequently lacking for the physician.

The knowledge explosion in medicine is another threat for the conscientious doctor.

Only the Christian physician has unlimited resources at his side – "the unsearchable riches of Christ" (Eph 3:8).

Not how much pressure is there, but where the pressure inclines the threatened soul is the key factor in survival.

REFERENCES
Suicide accounts for more deaths among doctors than car and plane crashes, drownings, and homicides combined. Doctors' suicide rate is twice the average for all white Americans. Every year, about 100 doctors suicide, a number equal to the graduating class of the average medical school. Furthermore, the suicide rate among female physicians is nearly four times higher than that for other women over age twenty-five.

Robert S. Mendelsohn, M.D., Confessions of a Medical Heretic, p. 128.

The malpractice crisis, last heard from several years ago, is alive and well and growing in Florida. Insurance companies paid $65 million to injured patients there last year, a 500 percent jump in four years. Physicians now pay up to $54,000 annually in premiums and privately admit to the practice of running-scared medicine.

Newsweek, September 17, 1984, p. 73.

When the average obstetrician is faced with a large neonate in the occiput posterior position and a questionable fetal heart tracing, it is much easier for him to do a cesarean than it is to stand by and wait for vaginal delivery – knowing that 20 years hence (when he is in his old age) he may well be the object of a malpractice suit by the child he is about to deliver.

I further submit that fear of malpractice suits is the major factor influencing the decision of the physician to compromise his judgment and opt for cesarean section at the slightest provocation.

I fear the cesarean section rate will continue to rise as long as obstetricians are sitting ducks for plaintiffs' attorneys.

Economic and legal considerations undoubtedly play a role in the high cesarean section rates in suburban [sic] hospitals ... a physician working day and night, often exhausted and sleepless, may not be physically, mentally, or emotionally capable of conducting ten to 12 hours of complicated labor, a task that in a prenatal center is usually divided among several members of the team.

CHAPTER 28
Preventive Medicine in a Nutshell: Shorthand Prescriptions for Major Problems

Simple inexpensive habits can prevent functional and organic diseases and their complement of pain, inconvenience, hospitalization and sometimes death. In this chapter are some examples.

* * * *
Who despises the day of small things?
What are you, O mighty mountain?
... you will become level ground
Zechariah 4:10, 7

* * * *
(The suggestions in these pages are not intended as a substitute for counseling with a competent physician in serious matters.)

* * * *

What to Do to Avoid Cancer
(Approximately 80-90 percent of the chances are under your control.)
Don't smoke.
Habitually use about half the fat intake of most Americans, i.e., about 20 percent of your calories, or less.
Use vegetable fats in their natural form. That is, avoid both animal fats and refined vegetable oils.
Use only a minimum of refined and processed foods, sugar, and salt.
Avoid unnecessary X rays.
Cultivate the positive emotions – faith, hope, love, cheerfulness, gratitude, joy, courage, and shun the negative ones – fear, worry, hate, envy, self-pity, etc. Learn to laugh often.

What to Do to Avoid Heart Disease and Strokes
Don't smoke.
Keep blood pressure low by avoiding excessive fats, sugar, salt, caffeine, alcohol, and refined and processed foods.
Keep blood cholesterol low by using animal foods only as a garnish rather than a staple.
Use as little of saturated fats as possible. This means not only using little of dairy foods and meats, but also hydrogenated fats found in many processed foods.
Exercise daily in a vigorous manner for at least thirty minutes to an hour.
Learn how to handle life's inevitable stresses.

What to Do to Avoid Diabetes
(Here we refer to the type of diabetes – adult-onset diabetes – which embraces 90 percent of cases, not juvenile diabetes which is a result of a diseased pancreas.)
Use natural foods, prepared in as natural a way as possible. That is, avoid large amounts of refined and processed foods, especially refined sugars. Avoid large amounts of fat, especially from dairy products and meats. Your diet should consist of fresh whole foods, chiefly of vegetable origin.

What to Do to Avoid Obesity
Avoid foods without fiber – that is all animal products and refined foods. At least 90 percent of your diet should be fruits, vegetables, whole grains in their natural state, i.e., not canned fruits and vegetables, or homecooked fruit.
Exercise daily, at least thirty minutes to an hour. Also take a short walk after each meal.
Avoid all fad diets, especially those emphasizing liquid protein, of low-carbohydrate, high-fat content.
Do not eat heavily at night. Or if your program compels you to have your chief meal in the evening, do not follow it with much sitting. Take a good walk before retiring.

What to Do to Avoid Excessive Fatigue
Remember most modern fatigue is from emotional causes. Mental conflict, worry, frustration, boredom, etc., cause a hundred times more fatigue than does physical activity.
Take time to read inspirational literature daily, especially biographies of people God has used in a special way.
Learn to take miniholidays – short rests. A rest is a little sleep and energizes.
Rest BEFORE you feel exhausted and you will need less time off in the long run.
Refuse to worry. Remember to "cast all your care upon him, for he careth for you" (1 Pe 5:7).
Practice Paul's prescription of Philippians 4:6: "Be anxious about nothing, be prayerful about everything, be thankful for anything."

Avoid overeating. It takes as much energy to digest a three-course meal as to do eight hours work.
Eat mainly fresh, whole food chiefly of vegetable origin.
Remember the body and mind thrive on change. Strive for variety. Go to different places, read a variety of books, avoid prolonged exposure to the same stresses.
Recreation is the margin of life's picture. Don't overstint the margin. But let your recreation be something that does recreate and not tear down.
Avoid constant battling with the clock. Give yourself more time than you need.
Live one day at a time. "Sufficient unto the day is the evil thereof" (Mt 6:34).
Practice the presence of God. Bible study and short frequent prayers will make that easy.

How to Avoid Osteoporosis
Avoid large, regular amounts of high-protein foods, particularly meat which is high in both protein and phosphorus. Excessive protein and phosphates ingested regularly lead to lessened calcium intake by the bones.
Exercise regularly in the sunshine and open air.
Eat abundantly of whole grains, fresh fruits, and vegetables.

How to Avoid High Blood Pressure
Use packaged and canned foods rarely. (Their excessive salt content promotes high blood pressure.)
Keep fatty foods to approximately 20 percent of your dietary calories and avoid animal and refined fats.
Accustom yourself to less added salt at the meal table. Including that added in cooking, use no more than a teaspoon a day.
Avoid all unnecessary drugs. (Keep in mind that 90 percent of drugs commonly used would be better poured down the sink, according to Dr. Denis Burkitt.)
Don't use tobacco or alcohol.
Avoid excessive emotional stress. Learn to practice the presence of God and trust his promises.
Exercise daily for at least thirty minutes. Also take a short walk after each meal.
Refined grains, sugars, and oils should be kept to an absolute minimum.

What to Do About Insomnia
Check out your daily program. You are probably doing something too intensely for too long. Remember your nights reflect your days, and if the days are tense so will the nights be.
Sleep is dependent upon physical and mental relaxation. That is to say, if you are keyed up mentally or emotionally, and if you are overstrained physically by excesses, sleep will not come easily.
Taper off towards the end of the day. When God draws the shades, begin to close shop. The last part of the day ideally should be family time – time for laughter, music, devotion, and recreation.
Avoid a diet high in fats and proteins. It is carbohydrate foods that predispose for sleep – fruits, vegetables, whole grains.
Neither say nor think anything negative after sundown. The nearer you get to fulfilling this ideal, the better you will sleep.
Be regular in your habits, particularly at the close of the day. Ideally, you should have a regular time for retiring.
Remember that sleep is like a coy girl who flees when courted, but who runs to you if ignored.
Worry about sleep makes sleep flee, but the awareness that you CAN rest in a relaxed manner and that all rest is a form of minisleep will enable you to survive no matter how slow unconsciousness is in coming.
Make up your mind that you will spend the necessary hours in bed without fuming whether you sleep or not, and that nature will take over when most necessary.
At times soothing music or recorded promises of Scripture can be played by a cassette recorder (use earphones if necessary) while waiting for sleep to come. Such passages as Psalms 23; 37; 142; 139; Lamentations 3:21-33, 57; Revelation 21; 22; Romans 8:28-39, etc., are ideal.

What to Remember About Sex
Sex is God's gift, but like all privileges it is capable of perversion.
Sex is a garnish to life, not a staple.
God intended that the sex act should reflect the prior union of heart and mind enjoyed by a couple covenanted to each other in marriage.
Those who remember that the essence of love is to give rather than to get will be most likely to succeed in physical relationships of married love.

Gentleness and love in the kitchen, etc., is the right preliminary for the same in the bedroom. Similarly, the spirit of love manifested throughout the fellowship of the day prepares for sexual oneness.

To detach sex from the rest of life is like trying to live off cream, and it will not work. "What God hath joined together, let no man put asunder" and God has joined the continuous attitude of forbearance, sympathy, and affection with its physical counterpart.

Where it is not possible to physically fulfill the sex drive, such insistent energies can be sublimated by direction into other channels. Isaac Newton was a typical celibate who achieved a great deal, because all his energies were focused on discoveries for the benefit of all mankind.

A simple diet free of excesses of stimulating foods (i.e., free of high protein, high fat), and free of alcohol, makes the temperate life easier to achieve. Abundance of fresh fruit and vegetables and whole grains should be the chief constituents of the diet.

Guard well the avenues of the soul. Ultimately we do whatever we think about continuously. That person is a fool who forever seeks to titillate his or her imagination on sexual matters.

Ideals to Aim at in Eating Habits

Remember that nature never overlooks a mistake or makes the smallest allowance for ignorance. Nevertheless, it is our habits and not occasional deviations that determine our health. The way of nature, though strict, is broad enough for most people in most situations, if they are really trying to do their best.

The common errors to avoid in order to enjoy, not just longevity, but good health in youth, middle, and old age, are the following:

- The lavish use of refined and processed foods.
- The free use of animal products – dairy foods and meats.
- The free use of sugar and salt.
- Hurried eating.
- Eating when tired or emotionally upset.
- Eating heavily before or after physically or mentally taxing work, or before sleep.
- Excessive protein intake. (Most likely when animal products are used freely.)
- Use of condiments and highly seasoned foods.
- Eating between meals.
- Use of free fats and oils. (These never occur in nature where all fats are emulsified and thus rendered easy of digestion.)
- Overeating (most likely when fiberless foods are used, or too many varieties at the one meal, or excessive use of concentrated foods like cream, nuts, etc., or use of sloppy foods.)
- Drinking with meals. (Food digests better if you don't.)
- Too many meals. (Even three good meals a day is bad living. Two good meals, and something very light is all that 99 percent of stomachs can handle. Most of the world lives on two meals a day.)
- Eating food too hot or too cold.
- Use of tea, coffee, cocoa. These are not nourishing but stimulating. Theine, caffeine and theobromine are toxic and cumulative. Tannin content is harmful. Similar objections apply to chocolate.
- Alcohol is an obvious "no-no" for the Christian who knows the tragic results excess brings, and the risk that even attempts at moderation invite for that one in ten who will become an alcoholic.

Treat each meal as a sacrament – something to be partaken of gratefully and joyously in the presence of God.

Most meals should consist of fresh, whole foods chiefly of vegetable origin.

Points to Remember Regarding Exercise

We need it daily as surely as we need food and rest.

Exercise that is vigorous should be taken at least thirty minutes a day. (But those out-of-shape should not begin with anything other than gentle activities.)

There should be gradual warm-up and similarly gradual cool-down for all exercise periods. A cold muscle is one easily torn and one that becomes still while still warm, will later be stiff. Stomach and back muscles must also be stretched and relaxed regularly or back troubles will ultimately arise.
Don't exercise vigorously immediately before or after a large meal. That's the time for a gentle walk of about fifteen to twenty minutes. More active endeavors should not take place till at least two hours after a meal.

Walking before bedtime, for most people, acts as a soporific preparing mind and body for healthful sleep. Remember that you can do physical work when mentally tired but not the reverse. Therefore, mental workers often do best if exercise is left till late in the day.

If you look for them, you will constantly find opportunities for physical activity while others are either wasting time or choosing more indulgent ways such as escalators or elevators rather than stairs, and driving instead of walking.

**Headaches**

The vast majority of headaches have simple causes that can be removed by attention to life-style. In almost all cases the problem is functional and not organic. Stress, caffeine, indoor pollutants, sinusitis, food poisoning, PMS or menopause in women, hormones, are all frequent triggers, but the first named is the most common.

Arteries and muscles belonging to the head or neck can react to stresses physical, emotional, or chemical, by dilation, constriction, inflammation, spasm, or a combination of these. The so-called tension headache is a muscle contraction headache and heads the list. Prolonged constriction of face, neck, and scalp muscles invites pain. Bad posture (usually a tense one), mental tension, and emotional stress are the primary triggers. There also seem to be grounds for suggesting that if the diet is particularly fatty, the likelihood of such headaches is greatly increased. Fatigue from insufficient sleep and/or prolonged close eyework can also contribute.

Even the unconscious habit of clenching the jaw or gritting the teeth can lead to headache through muscular tension. This writer knows that, not just from the literature, but from experience. For approximately the past thirty years, I have tried to get my most important work done before breakfast as in those hours I am least likely to be interrupted. But too often I have found myself so eager to get things finished quickly, that I have done my work under considerable muscular tension with occasional results of later headache blighting the rest of the day. A number of times traveling, I have found myself allergic to light, particularly of the fluorescent variety in planes and airports. While on holidays and doing less mental work, such problems rarely occur. I think it was Jane Brody who made a similar confession. Reasoning from cause to effect is one of the most valuable habits for the health-seeker. Sadly, some of us, including the writer, take years to learn this lesson.

As regards migraines, it must be confessed, that so far, theories outnumber facts. There is evidence that the typical sufferer is meticulous, scrupulously conscientious, and often perfectionistic or at least governed by rigid standards. Migraine tends to run in families and is often precipitated by allergic reactions to foods, odors, inhalants, etc. Ergotamine tartrate is the favorite drug accompanying the necessary rest in a dark and quiet retreat.

A headache is possibly nature's warning that we are taking some things too seriously and forgetting to rest and laugh enough. Perhaps if more time were spent in recreational pursuits by headache sufferers, less time would be spent prostrate. As with food, so with recreation – there is no certain way of defining the precise amount needed, and all err on one side or the other according to their temperament. If, of course, we have come to know ourselves well, we will be wise to bend further than our natural predilections suggest.

All should learn to work with as little tension as possible, so as to avoid piling up the necessity for much time away from work. One should often consciously relax the brow, the jaws, and the muscles of the working limbs. Open the fist, drop the shoulders, clear the furrowed brow, and breathe deeply. Occasionally close the eyes and sigh. Then take a minute vacation back to scenes of idyllic childhood joy and peace. Remembering that the Sabbath is not just an institution but a principle of life, one should practice the art of frequent rests even if only a few minutes an hour.

The practice of gratitude, praise, song, etc., will put a lift into your life-style and reduce the number of gray days and depressed energies.

**Backaches**

While many backaches are the result of injury, the vast majority are the consequence of our sedentary life-style. It is impossible to have a healthy back if one sits most of the time most days. Therefore, it is not strange that backache (particularly low-back pain) is the next most common malady for Americans after headaches and colds. Surprisingly, it is also one of our most expensive diseases, coming close in cost to the phenomenal sum associated with CHD.

The lower spine is dependent upon the support of muscles and ligaments, not only in the back itself, but also in the abdomen. Probably four out of five backaches are the result of these weak supports. Not only sedentary living but obesity, poor posture, inadequate shoes, and faulty lifting habits contribute to the problem. Excessively soft beds also pave the way for back trouble. A firm mattress should always be preferred.

One should practice lifting without bending over from the waist. Lifting should be done with the back straight and the bending done at the knees while the stomach muscles remain tensed. Straighten up gradually, keeping the weight close to the abdomen.

For those who drive long distances, it is an advantage to place a pillow behind the lower back. While sitting or walking attend to your posture, which should be generally tall though not stiff. "Sit tall, walk tall, think tall."

Be comforted with the knowledge that the vast majority of backaches cure themselves if the sufferer is patient, whereas drastic interference at times does much more harm than good. Beware of overuse of such items as painkillers and anti-inflammatory drugs. Here, as with the whole range of human ills, prevention remains superior to cure.

**Treatment of a Cold**
First, do all you can do to avoid colds by temperate living with sufficient sleep, exercise, etc. and avoiding large exposure to crowded places. Especially eat sparingly of fats and refined foods.

The moment you become aware that you have a cold, change your diet. Eat only fruit or salads, or thin vegetable broths. Avoid starches and fats. Stop exercising vigorously because the body now needs all its energies to fight the infection. Take more rest, including bed rest.

There is a Herculean method of getting rid of a cold within a day or two for those with the willpower to do it, and whose social situation permits it. While fasting, drink abundantly of pure water – taking water in each time you void it day and night, and simultaneously use raw garlic, particularly a wad of it in the cheek to be chewed from time to time. Obviously this is not possible if you are moving among others besides your family. But it does work. For those with important appointments to keep, threatened by the advent of a cold, this is a way of solving the problem.

Dealing with Arthritis

About 35 people in this country are afflicted with arthritis, and we are still ignorant about much that contributes to its cause and cure. Osteoarthritis is less obscure as to causation. It is associated usually with old age. By fifty-five, most people have it to some degree.

Specialists usually prescribe freely a variety of drugs for arthritis, many of which actually add ultimately to the pain of the sufferer, and the variety of his or her problems. Such specialists usually contend that diet neither triggers nor cures arthritis. This position, however, has been based only on slender evidence. For a large number of people certain foods can be a significant factor. It is also true that, for many, arthritis is caused in part by reaction to intense emotional upsets. Obviously, this does not mean that every time we experience an emotional upheaval we have to fear arthritis. But this disease, and diabetes, and a host of others in some people is caused or augmented emotionally.

In our society most diseases are not caused by nutritional deficiencies but by excesses, especially of protein and fat and sugar. The arthritis sufferer should beware of such foods as shellfish, fish, poultry, red meat, and legumes which are high in purines. Some nutritionists believe that certain individuals cannot metabolize these foods and arthritis results. Heredity undoubtedly is a factor here. Many have found that changing to foods low in purines and proteins stops gout which is a form of arthritis. Cyclical arthritis can be a symptom of PMS, and some women find a link between estrogen deprivation at menopause and arthritic pain.

Osteoarthritis is the most common type of arthritis. Found most frequently in the joints, it may be that some cases result from excessive physical work, though this is not certain. It could be that where there are dietary problems, then one is more prone to osteoarthritis from a large amount of activity. On the other hand, because no blood vessels are directly linked with joint surfaces, their nourishment is only possible through adequate motion of the limbs. Those with osteoarthritis should reason from cause to effect. Exercise only to that point where the pain is not increased and more crippling. Hardworking inhabitants of the Third World rarely develop this problem, and this indicates that diet is the chief factor. Excessive fats cripple blood circulation and possibly trigger joint problems thereby. Where animal products are only used to a minimum, the Third World rarely develop this problem, and this indicates that diet is the chief factor. Excessive fats cripple blood circulation and possibly trigger joint problems thereby. Where animal products are only used to a minimum, severe forms of arthritis are rare, as in China, Japan, and Africa. In contrast, in the USA 1 to 4% have rheumatoid arthritis.

According to a report in the British Medical journal (282:2027, 1981) the removal of dairy products from the diet can lead to considerable improvement for sufferers.

What to Do in View of the Modern Practice of Prolonging Dying Rather Than Living

Too frequently modern medical technology is abused rather than used by prolonging dying rather than living. It is an insult to human dignity and a cruelty to the sufferer and his loved ones to have unnecessary prolonged pain or even existence once the quality of life has fled and restoration is impossible. Christians do not believe in euthanasia, but most do believe that unnatural heroic efforts merely to preserve functioning protoplasm in a being, whose true functioning of mind and will has ceased, is unjustifiable.

Furthermore, thousands yearly in this country are bankrupt or nearly so by the unnecessary expenses this immoral procedure causes. Loved ones of the dying should not have to pay for unnecessary and painful medical experiments.

The best solution is to use something like the "Living Will" Scientific American published in 1973. Here it is:

To My Family, My Physician, My Clergyman, My Lawyer –

If the time comes when I can no longer take part in decisions for my own future, let this statement stand as the testament of my wishes:

If there is no reasonable expectation of my recovery from physical or mental disability, I, [insert name here] request that I be allowed to die and not be kept alive by artificial means or heroic measures. Death is as much a reality as birth, growth, maturity and old age – it is the one certainty. I do not fear death as much as I fear the indignity of deterioration, dependence and hopeless pain. I ask that medication be mercifully administered to me for terminal suffering even if it hastens the moment of death.

This request is made after careful consideration. Although this document is not legally binding, you who care for me will, I hope, feel morally bound to follow its mandate. I recognize that it places a heavy burden of responsibility upon you, and it is with the intention of sharing that responsibility and of mitigating any feelings of guilt that this statement is made.

Signed:

Date:

Witnessed by:
Ideals for Each Day

Remember that life is nothing more than doing one thing instead of another. In other words, choice is the great business of existence, and the wise person chooses according to knowledge.

Our very first duty is adoration. What we love determines all else, including every choice. Therefore, our chief need is time with God and his Word until his truth so impresses itself on the mind, that it will have more influence than anything else encountered during the day.

The first and great commandment is to love God with the mind. One cannot be a mature Christian without study. Every Christian should cultivate the reading of the most profitable books with the aim of glorifying God and blessing his neighbor. Books on Scripture, great biographies, books on health of mind, body, and soul, and books on our chosen work – these should take precedence over all others. We assume that the Bible itself will be primary in the attention of every believer. Read it in many versions, not just one.

The Sabbath is not only the seventh day of the week for rest and worship, but it is a principle of life. All of us need a little Sabbath in each day. Step back to jump further. Tarry a while that you may finish the sooner. Remember every great life has rootage and fruitage. Where the first is neglected the second will fail.

The self-centered life can never be joyous for long. Real joy comes from increasing the joy of others. Health also comes that way.

Practice the 80-20 principle continually. Twenty percent of what we do yields 80 percent of satisfaction, whereas 80 percent of what we do yields only 20 percent of satisfaction. Inasmuch as none of us can do all we wish to do, or all others expect us to do, practice putting first things first. Be certain to do the 20 percent that counts, even if some of the 80 percent has to go by the board.

Remember that when two duties conflict, one ceases to be a duty.

Work done under great tension is like trying to ride a bike with the brakes on. Only in our free, relaxed, happy work are we the most effective. Regularly unroll the ball of your fist, lower your shoulders and breathe deeply. Don't be afraid to just stretch out on the floor or sofa for brief rests to sever tensions and recoup.

Remember that your part, compared with God's, is exceedingly small yet indispensable. "Except the Lord build the house they labor in vain that build it."

Often sing as you go, even if the singing is unheard, or tuneless.

Remember experience is not what happens to you, but what you do with what happens to you. Usually there are two handles to any event by which it may be laid hold of. Choose the positive one. In times of loss, count what remains and concentrate on it. Whatever gets your attention gets you.

It is not sacrilegious to laugh, but it is atheistic never to laugh. The God who created the monkey also invented mirth. Don't let its abuse by others prevent your use of it.

Faith, hope, and love are the great motive powers of the soul. The cultivation of these is more important than anything else in your life.

You are not what you think you are, but what you think -- you are. Therefore, think in harmony with the central facts of existence, those set out in Scripture about the preeminence of God, the invincibility of good, the loss evil inevitably brings, the primacy of love and faith, the ultimate victory of the holy.
CHAPTER 29
Quack! Quack!

Quackery in medicine is a $10 billion a year business. Not to be able to distinguish quackery from genuine medicine may mean choosing death rather than life. This chapter tells you how to tell the false from the true among medical practitioners.

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Take the humbugs out of this world, and you haven't much left to do business with.
H. W. Shaw

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For there are many ... deceivers ... teaching things which they ought not, for filthy lucre's sake.
Titus 1:10, 11

* * * *

But ye are forgers of lies, ye are all physicians of no value.
Job 13:4

* * * *

The simple believeth every word: but the prudent man looketh well to his going.
Proverbs 14:15

* * * *

Medical Counterfeiters

Eve was the highest point of God's creation but she fell to the lowest. Let us not, therefore, be surprised that a venture so estimable, so vital, so rewarding as the restoration of health to sufferers should be surrounded by counterfeits on all sides, in short by quackery!

The first mark of quackery is dishonesty – where people are more interested in dishonest gain than they are in the health of the people they pretend to serve. They have no conscience. Of course, that statement is a generalization. There are some ignorant people who mean the best, but as a result of their ignorance they, too, are practicing quackery. Dishonesty and ignorance are the great enemies of those seeking to find helpers in their search for health.

Another mark of the quack is extravagant claims. True, an enthusiastic person can exaggerate about the virtues of something which he believes and that happens at times, not only within quasi-medical practice, but even with the genuine article. Nonetheless, it is the characteristic stamp of the true quack. Wise men know it is not good to be too enthusiastic over even a good thing. Quacks usually forget that. Let not seekers for health forget it.

When seeking health and confronted with possible quacks, ask these questions: 1) Are they qualified by character and training? 2) Do they use adequate equipment? 3) Do they use adequate methods? 4) Are their claims false and/or extravagant? 5) Are their methods those which cannot really be defended in terms of anatomy, physiology, or pathology? Iris diagnosis would fall in this category. Occult methods likewise. 6) Can their claims be supported by documentation from qualified authors? 7) In their advertising, do you find evidence of assertions promising a "quick fix"? 8) Do these people show an awareness that there is a great deal more that is not understood in medicine than is understood? 9) Do they confess that many things are yet beyond us and that we "see through a glass dimly"?

Have you made contact with the people who are the supposed testimonials to the virtues of the healers? Are they legitimate? Or is there evidence that such people were treated for weeks or months systematically in such a way that serious disorders could well have been overlooked? One of the great dangers of quackery is that of pursuing wrong roads in search of health at a time when a real problem needs immediate medical help from trained practitioners.

Do the "healers" forever urge that they have been persecuted? Do they suggest they are hated because they alone have the truth, and that jealousy is what provokes the persecutions they endure? Such an attitude is not the attitude of a true reformer.

Do these folk forever deride everything associated with modern medicine? Do they see no good whatever in the medical establishment?

Are there any authoritative controls and supervision over what such practitioners do? Does the government acknowledge them by way of payment of benefits, etc.? If not, why not?

All of which is not to say that there are no quacks even in the recognized medical establishment. There are and always have been. But it is the desire of the great majority in the medical fraternity to act according to proven knowledge and in the words of Hippocrates "to do no harm." This is not usually true of the majority of quacks. Quacks usually look for that which is most lucrative and, therefore, they claim to heal those things that others acknowledge are beyond healing. That is why phony cancer cures abound and likewise questionable arthritis cures. Remember that the issue here is not just the loss of 10 billion dollars, but it is the matter of the thousands of people, particularly the elderly, who annually suffer unnecessary pain and death.

The Quack's Achilles' Heel
The Achilles' heel of most quacks is the tremendous emphasis they place upon some single odd nostrum. It may be a questionable drug, or hormone, or something from the queen bee, or it may be some extract from foods.

Many established medical authorities consider that the advertising for many vitamin preparations is quackery. But any supposed healer who seems to put all his stock in some single item, thereby reveals his lack of balance and is fraudulent whether it be willingly or unwillingly. The body regularly requires about fifty different items from the good earth, including vitamins, minerals, the elements of carbohydrates, proteins, and fats; and the one certain thing is that none of these items on its own can sustain life or bring healing. And it is just as certain that those who make diet, as a whole, the cure-all for everything are on the wrong track, for living is more than eating and the world is more than food. This is not to deny that wrong diet is responsible for most ills.

Can one rely on government agencies to police fraudulent medical practitioners? No. The Food and Drug Administration spends less than .001 percent of its budget to combat quackery. Remember that the administration is responsible for policing 60,000 drug, cosmetic, and food companies. And they can't do that properly either.

Be sure and take good counsel from some trusted medical practitioner before you even consider pursuing the recommendations of someone without credentials. If that someone is merely referring you to medical literature that is known and respected, it matters not that he or she has no credentials. But if it is someone who is flying in the face of all that has been established and proven by medical researchers, you have the right to ask as to their own qualifications.

In the long run, nothing can beat good common sense. And it's an old saying that patent medicines should be left alone until they've been long-tried and found valuable. Don't be in the avant-garde of those who rush some new thing or some new healer.

We leave two sayings with you: "If it's new, it's rarely true; if it's true, it's rarely new." "The truth is never simple, and rarely pure." Those who forget these platitudes are either ignorant or dishonest quacks, or their victims.

**SUMMARY**

The higher anything is in the scale of being, the more capable it is of perversion.

The most common marks of quackery are ignorance and dishonesty. The practitioners are seeking dishonest gain rather than to serve.

Extravagant claims and focus upon some single item as magical in results also characterize most quacks.

The questions you should ask concerning possible quacks include these: (1) Are they qualified by character and training? (2) Do they use adequate equipment? (3) Do they use adequate methods? (4) Are their claims false and/or exaggerated? (5) Are their methods those that can't really be defended scientifically? (6) Can their claims be supported by documentation from qualified researchers? (7) In their advertising are they ever promising a "quick fix"? (8) Do they show a humble awareness of how little is really yet known by modern medicine?

Quacks usually claim to be recipients of continuous persecution.

If a healer ridicules everything associated with modern medicine, he certainly belongs to the establishment of quackery.

Quacks try to avoid all kinds of authoritative controls and supervision.

Quacks usually place a tremendous emphasis upon some single odd nostrum.

Remember, there are quacks within the medical establishment as well as without.

Always ask the common-sense question: Does this person personify virtues and practices implicit in health science?

Don't make the mistake of thinking that the Food and Drug Administration is able to police fraudulent medical procedures. It spends less than .001 percent of its budget to combat quackery.

Remember, in gambling with your health you are gambling with the only thing you have of real value. Caution is more recommended in this area than in all the other areas of life.
CHAPTER 30
Watch This Man! and Woman!

Dwight L. Moody said he had more trouble with himself than with any man he had ever met. This truth applies to all of us in the field of health as well as in other areas.

* * * *

Thou art the man. (2 Samuel 12:7)

And if the soul
is to know itself
it must look
into a soul:
the stranger is an enemy, we've seen him in the mirror.

George Seferis, Collected Poems, p. 9.

* * * *

I have much ado to know myself.

William Shakespeare, The Merchant of Venice.

* * * *

Your Worst Enemy!

Who? You! The greatest threat to the health of most of us is our own personal temperament. The popular division of temperaments into sanguine, phlegmatic, choleric, and melancholic do not reflect scientific discussion, but they do set forth certain basic truths from which all can profit.

It is a matter of fact that people differ from one another and their temperamental differences lead to variations in life-style for good or ill.

Second, but not unrelated, is the fact that all of us partake more of one typical bodily structure than another. There are three extremes of body shape:

The endomorph is essentially rounded, with a round head, a bulbous stomach, a heavy build, and a lot of fat; but he is not necessarily a fat man. When short of food, he does not shrink to become a mesomorph, let alone an ectomorph; he just becomes a starved endomorph. The mesomorph is the sculptor's model, with a large head, broad shoulders, a lot of muscle and bone, not much fat, relatively narrow hips. When fattened up, he does not become an endomorph; he is then a fat mesomorph, for these three characteristic shapes are basically quite distinct. The ectomorph is the thin one, all sharpness and angles, with spindly legs and spindly arms, narrow shoulders and still narrower hips, without much muscle or fat, but with a large skin area relative to his diminutive bulk. Even when fattened up, he is still the ectomorph.

Endomorphs are of no use at the Olympics except as spectators. But they are often the life of the party and the social cogs of all human groups. Ectomorphs are usually not the most social of creatures but as loners often come up with ideas that change the world. The mesomorph, particularly, is the one who gets things moving and done. He is aggressive and energetic.

Actually all of us have a bit of all three of these types. Amounts are sometimes rated from 1 to 7. Extreme instances would be 7-1-1, 1-7-1, 1-1-7. The 7 points to that form which predominates. Someone with an equal amount of all three would be a 4-4-4. When one remembers that an average marathon runner weighs 134 lbs., it is obvious why endomorphs are not long-distance runners. Our shape often influences the form our hobbies and sports assume as well as our social activities.

Returning to the matter of our respective temperaments (we speak for practical not academic purposes), the sanguine temperament is warm and pleasant, the phlegmatic is slow-moving and apathetic; the melancholic, depressed and sad, while the choleric is hot-tempered and quick to react. Again, as with body type, most of us are not pure instances but a combination of temperaments with one predominating. Scientific studies would not use these classifications, but for the purpose of making our point that we all have predilections of disposition, they are useful. It is a well-known fact that some people are more constitutionally cheerful, or more social than their fellows, while others are distinguished by behavior that tends to be primarily rational or emotional. "Know thyself" is good counsel for all of us, for none of us is perfectly balanced, and our tendencies often have within them the seeds of disease and death.

Using our descriptive terms we can say that the person who is melancholic and an ectomorph may tend to be almost antisocial and spend too much time away from society, while the sanguine endomorph is prone to the opposite error. If he doesn't watch himself, his ultimate productivity in life may be slight because of absorption in the social round. The third temperamental type – the choleric – needs to be on guard against himself as he mixes in society lest he overreact, while the phlegmatic is the opposite of the quickly reacting choleric and needs to encourage himself to be more socially responsive.

Be Suspicious – of Yourself!

These facts have an important application to matters of health. Because none of us is perfectly well-balanced, because we tend to err in the direction of our inborn temperament, we need to be suspicious of our natural tendencies to deviate from proper norms of behavior. If you are not quite sure what those tendencies are, ask those who live with you. Almost certainly
they know, and, furthermore, they are agreed in what they know. Those with whom we live often know us better than we know ourselves.

Let us consider some examples. Those who are phlegmatic in temperament do not, as a rule, take kindly to exercise and the same is true of the melancholic. The sanguine is often self-indulgent and, therefore, may find it hard to maintain a strict regimen of physical activity. The choleric, on the other hand, may tend to exercise to excess. As regards body types, obviously the endomorph is least fitted for athletic pursuits while the mesomorph excels. The ectomorph is often a great walker.

Come now to matters of eating and drinking. The endomorph is likely to eat and drink to excess and this is often true also of those with a phlegmatic temperament. On the other hand, ectomorphs are frequently spare eaters and likewise the melancholic. As regards sleep, the endomorph and mesomorph usually sleep better than the ectomorph, and the phlegmatic tends to match them in this regard. The sanguine usually sleeps well, better than the melancholic and choleric.

Scripture abounds with exhortations to self-examination. "... Let a man examine himself" says Paul in 1 Corinthians 11:28, and this is echoed in 2 Corinthians 13:5 – "Examine yourselves ... Test yourselves." This should not dwindle into extreme introspection, but should be enough for that self-knowledge which can be protective against errors of practice.

When we find our personal weak points, we should endeavor to tend in the opposite direction. This may accomplish the needed balance. If, for example, we tend to be workaholics, we should make up a timetable with adequate provision in it for rest and recreation and family socializing. On the other hand, if we are poor self-starters and undisciplined in work, we need to make certain rules which will prompt us to improvement.

May I offer a personal example? My own temperament is exceedingly intense. I am prone to kill a flea with a fifty-pound hammer. Blessed with considerable energy, I tend to waste vitality even in ordinary speech by unnecessary vehemence. In all good pursuits that are pleasing to my temperament I tend to overdo. Over thirty-five years ago, a wise physician warned me that I might be physically and nervously "finished" by the age of forty, because of my tendency to pursue nervous activities excessively to the exclusion of the physical and the recreational. Most of my conscious hours are spent with books, typewriters, and the like – a program quite alien to that of Eden, far from ideal for this stress-filled century, and requiring abundant exercise to counter and yet sustain it. Because my daily work is so heavily freighted with mental work of considerable intensity, I am not a good sleeper. Tending more to an ectomorphic constitution than either of the other body types, I find in myself all the negative tendencies associated with the ectomorph – too much thinking rather than doing, the behavior of a "loner," etc. There are times when, because of mental weariness, I flee from people and I am prone to give inadequate attention to social and communal activities.

Meet a Perfect Stranger – Yourself!

Look now in your own mirror. Consider what your friends, your best friends, have told you about yourself. What are your natural excesses and deficiencies? If, for example, temperamentally you are a worrier, it would be worth the while to consider and apply the counsels on this matter found in another chapter, including the habit of skepticism about all your fears of the future. If, however, you are habitually sanguine, it might be well to apply a measure of skepticism to your rosy anticipations lest they are marred by unreality and failure to consider all the relevant facts.

Remember that the Scripture declares the human heart to be " incurably wicked" (Jer 17:9). We are all prone to rationalization. I have found, times without number, that I am capable of devising reasons for just about any course of action I wish to pursue – though continual self-examination and examination of the facts is capable of stripping such rationalizations of their disguises and their "lies," white, black, or otherwise. Blessed is the person who has come to distrust himself or herself. The facts (especially the moral admonitions of Scripture) point the way to truth, not our feelings. Self-deception is the most dangerous deception of all.

As you look within, remember that it is vital to take ten good looks at the Physician for everyone at the disease. "Looking unto Jesus" is the chief preoccupation of the Christian, not looking at oneself. The latter must ever lead to the former. Consider the conclusions of Paul as he reviewed his weaknesses:

Three times I besought the Lord about this, that it should leave me; but he said to me, "My grace is sufficient for you, for my power is made perfect in weakness." I will all the more gladly boast of my weaknesses, that the power of Christ may rest upon me. For the sake of Christ, then, I am content with weaknesses, insults, hardships, persecutions, and calamities; for when I am weak, then I am strong. (2 Cor 12:8-10 RSV)

There spoke a man who had found the secret of power. And that secret is for you.

SUMMARY

The greatest threat to the health of most of us is our own personal temperament.

Know thyself is essential counsel for the one who would remain healthy. Each individual temperament has its own advantages and its own dangers.

But for every look at the disease take ten good looks at the physician – the Great Physician, Christ.

REFERENCE

CHAPTER 31
One at a Time, Please!

There are thousands of methods of losing weight but almost all of them yield only temporary results. "When all else fails – follow the directions" – God's directions.

* * * *

The average person eats between 30 and 40 tons of food in his or her lifetime. It is not strange that some are fat. It is a miracle if you are not.

* * * *

It is easy to slim. Some people have done it fifty times!

* * * *

The Pounds Cry Out

It's a joke small boys like to tell. There was a talking weighing machine which spoke the results. When a considerably overweight lady stood on the scales, instead of announcing the poundage, the machine requested "One at a time, please!"

Being overweight is no laughing matter. It is the source of much of the sadness of the Western world, particularly for the female sex. Millions of frustrated people in this country are desperately trying one thing after another to lose weight – and continually failing. While fat people are often pictured as jolly people, the real truth is usually otherwise. The core of the truth in that myth is found in the confession of one who said “I'm too heavy to fight or to run, so I've just got to get along with people.”

According to Time magazine of January 20, 1986:
1. Nearly 90 percent of Americans think they weigh too much and more than 35 percent want to lose at least 15 lbs.
2. About 30 percent of U.S. women and 16 percent of men were on diets in 1984.
3. Four-fifths of girls in the fourth grade are dieting.
4. Thirty-one percent of American women aged nineteen to thirty-nine diet at least once a month, and 16 percent consider themselves perpetual dieters.

In the battle of the bulge Americans spend about $5 billion per year, which includes $200 million worth of over-the-counter diet drugs. The only sure results of all this is a thinner wallet. Most weight-reducing techniques do cause the loss of poundage, but it's not the poundage of fat. It is water that is lost, which is quickly recovered, and the battle is on once more.

While the concern of most overweight people is appearance, health is the real issue. Any level of obesity – even an extra 5 to 10 lbs. – increases health risks, particularly the risk of developing today's leading causes of death – heart disease and cancer. Obesity is linked with hypertension, elevated blood fats, low HDL and high LDL, cholesterol, and diabetes, all of which predispose to atherosclerosis and heart disease. Obesity increases the risk of uterine cancer up to tenfold, and the risk of kidney and other cancers is also increased. Once you are 10 lbs. overweight, every additional pound is the equivalent of a month off your life.

Myths of Obesity

There are many myths in connection with obesity. One such myth is that all fat people are gluttons, and that thin people always eat less. Not all fat people eat more than their counterparts who are thinner. And there are thin people who eat considerably more than fat people. The nature of the person and the nature of the food both need to be taken into account. Some people seem to have a slower metabolism than others and put on weight more easily. Some thin people may be so because their body loses much vitality in ridding itself of the excess food ingested. But usually fat people eat the wrong type of food. It is a truism – but one that needs to be taken into account – that fats in foods make the eater fat. Most fat people eat too much of animal products and fatty foods in particular, and they move too little!

It is a myth that health concern is the main reason fat people wish to lose weight. Rather it is the inner turmoil resulting from embarrassment and frustration regarding their appearance. It is also a myth that heredity alone is responsible for obesity. Probably less than 2 percent of overweight people have glandular problems which they have inherited. Other myths include the idea that losing weight is easy, or that it can be done by dieting alone.

Most Popular Methods of Weight Loss Are Either Dangerous or Useless

Let us consider the wrong methods usually employed. A high-fat diet is very popular as a means of losing weight. Only the ignorant pursue that route. The evidence is now overwhelming that a highfat diet is the most unhealthy diet possible. Here is an instance where the cure is worse than the disease. The same can be said of high-protein diets, particularly liquid-protein diets which have been responsible for many deaths. The body was not made to handle large amounts of protein at one time. Protein can't be stored as such. Diets that are excessively high in fat and protein are usually very low in vitamin C and other necessary nutrients. Such diets usually consist chiefly of animal products. It is precisely these foods that modern nutritional knowledge says we need to reduce to a minimum.

Others try fasting, and while this does cause a loss of weight, it is mainly water that is being lost – not fat. Fasting for longer than two or three days can be a dangerous business. It should only be done under the supervision of a physician. But it, too, is a wrong approach to the problem of obesity.
The U.S. population is the world's fattest. Undoubtedly, this is because our diet has a higher proportion of rich foods than the diet of other nations. Obesity is the result of national affluence and the shift from the chiefly cereal diet of other centuries to one that majors in animal products. The ancients ate occasional feasts on certain holy days, but moderns tend to feast at every meal, and overweight is the inevitable result.

It is in this century that chronic diseases have increased so greatly, and many of these are the result of obesity. Not only has heart disease become pandemic, but also diabetes, gallstones, respiratory disorders, and degenerative changes in the joints. Men who are fat have a higher incidence of cancer of the colon, rectum, and prostate. And women who are overweight have the greater risk of developing malignant tumors of the ovaries and uterine lining, and after menopause, of the breasts. Thus, in our century, we are learning that affluence has an inverse relationship to health nationally, and often, personally.

Unnatural living habits lead to unnatural embarrassments. For the overweight person the normal things of life, however superficial, can become difficult situations. It may prove difficult to sit in an airplane or to even find the right size clothes to wear. Discrimination is another problem that faces the obese as they seek employment. From doctors and friends comes the constant echo of the inner guilt of the fat person. One woman was told by her doctor that if she didn't lose weight, he would put her in her coffin with a shoehorn.

The Only Way to Weight Control

All this trauma is unnecessary. It is not difficult to lose weight if one knows the truth about the laws of life. The Edenic story tells us that our first parents were given a diet of fruits, nuts, grains, and vegetables, and their program was one that led them to eat by the sweat of their brow. The right type of diet and the right type of exercise are the sovereign cures for obesity. The right type of diet will consist of natural food prepared in as natural a way as possible. It will be fresh and whole, chiefly of vegetable origin. When people eat food that has been refined, the fiber is missing. It is the ingested fiber that sends a message to the appestat in the brain telling the eater the time has come to stop. Where there is no fiber in the diet, the appestat receives no such message and people eat on. When people eat sloppy food or any food that can be taken quickly, the appestat never gets the right word in time. You can't eat fibrous foods like fruits, vegetables, and whole grains quickly unless they are spoiled by the addition of some type of liquid. So the golden rule for the overweight person is to return to a diet as close to that of Eden as possible. Fruits, vegetables, salads, whole grains should become the chief elements of the diet.

It is not enough to eat right. One must also move right. All dieting regimes fail that are not accompanied by exercise. True, we have heard often how hard it is to use up calories by physical movement. But what we have not heard enough about is the fact that the heightened metabolism increases and continues for hours even after exercise ceases. If overweight people would only begin by walking about a half-hour a day it could make all the difference for them. Later they should learn to walk a half-hour on two separate occasions, perhaps morning and evening.

Nobody has ever seen a fat squirrel. Why not? The fact is animals that run wild are rarely overweight. They may be muscular like the rhinoceros or the elephant. But they are not suffering from obesity – a misproportion of fatty tissues. Only when animals are confined and fed by humans do they become overweight. It is the lack of balance in our food that triggers this
problem. Food as God made it, and as he designed it to be eaten, taken by a person who is normally active, does not lead to obesity.

Christians need to remember that one of the fruits of the Spirit is temperance. Paul in 1 Corinthians 9:25 speaks about "self-control in all things" (RSV). This should be the guiding principle for the Christian. Galatians 6:7 reminds us that "whatever a man sows, that he will also reap" (RSV). Everything we do in thought, word, or deed, meets us again. The results of every decision are stored up within ourselves, influencing the future.

The Scriptures frequently link feasting and falling. Read Daniel 1 and 5 for examples. In 1 Samuel 25:36-38 (RSV) we read these words:

And Abigail came to Nabal; and, lo, he was holding a feast in his house, like the feast of a king. And Nabal's heart was merry within him, for he was very drunk; so she told him nothing at all until the morning light. And in the morning, when the wine had gone out of Nabal, his wife told him these things, and his heart died within him, and he became as a stone. And about ten days later the Lord smote Nabal; and he died.

This description, along with that of the death of the rich fool recorded in Luke 12: 19, 20, exactly matches what happens in instances of heart attack and stroke. Even the heathen have seen the necessity for temperance in eating and drinking. As the poet Hesiod exclaimed, "How blessed is the half-filled cup and the temperate bowl; fools not to know that the half exceeds the whole."

When our Lord spoke of the end of the world, he warned his followers against excesses in quality and quantity of food and drink (see Lk 21:34). All surfeiting and drunkenness is condemned by Holy Writ, and this is done in mercy that our lives might not be spoiled. Matthew 24:45-51 warns us that those who eat and drink with the drunken will not be ready for the Second Coming of Christ.

**Summary**
Fat people, despite their reputation for humor, have a problem that is no laughing matter. Obesity is a dire threat to health and life.
Americans are the fattest people in the world, because obesity usually accompanies affluence. Most popular methods of weight control are either useless or dangerous, or both. The remedy for obesity is obedience to natural law – eating unrefined foods and being physically active. Animals in the wilds are never fat. Our obesity is the product of our civilization.
SECTION III  
SEX, CRISES, AND HORMONES

"Marriage is honorable in all ... but ..."

(Hebrews 13:4)

CHAPTER 32  
The Christian View of Sex

Only he who gave the gift of sex can rightly prescribe how it should be used. The Christian worldview requires chastity outside of marriage. Failure to comply with the biblical principles of purity has led to the overwhelming tide of sexually transmitted diseases of which AIDS is the most recent. Sexual indulgence does not lead to Happy Valley. It leads to frustration, boredom, sickness and death.

* * * *

The practice of sex without the cherishing of the ideals of purity and unselfishness is self-defeating. God invented sex and we must play the game according to his rules. There is no such thing as privilege without responsibility any more than there could be day without night or summer without winter. Sex is a spice, a garnish, a seasoning. Whoever tries to make it the main dish of life disrupts the pattern of existence and invites chaos. Physical union ideally is the outward sign of a prior union of minds and hearts. Only then has it worth, only then will it last.

D.F.

* * * *

I could not love thee, dear, so much,  
Loved I not honour more.  
Lovelace

* * * *

How easily things go wrong!  
A sigh too deep, a kiss too long,  
A mist and a blending rain,  
And life is never the same again.  
Anonymous

* * * *

Had we never loved sae kindly  
Had we never loved sae blindly,  
Never met – or never parted,  
We had ne'er been brokenhearted.  
Robert Burns

* * * *

All Depends On Your World View

Birth, copulation, and death:  
That's all the facts when it comes to brass tacks.  
Birth, copulation, and death.

So says the modern poet, and with him the well-known schoolboy essayist agreed when he summarized life as "Hatched, matched, dispatched."

Whether we agree or not with the viewpoint of life expressed by either the poet or the student, it is still obvious that sex plays a large part in every person's existence, and, therefore, our happiness or misery will depend in part on how we relate to the challenge sex affords. Shall we indulge sex within Epicurean limits only, or shall we control it according to the principles laid down in the Christian guidebook?

Our discussion revolves around the Christian view of sex, for it is obvious that our decision in this matter depends entirely upon our world view. The instinct of sex is similar to the other passions that clamor in our nature. It cannot be separated from the way we choose to eat, sleep, indulge in temper, hatred, covetousness, etc. Our attitude to all these will depend on what we believe man to be. If man is only an enlarged protein molecule, if he is just "a fuss in the mud and a stir in the slime," if humanity is merely a "planetary eczema," then there is no reason why man should not behave like all other animals – without restraint. But if man is made in the image of God, if he is the purchase of God's saving action, his attitude will be different.

C. K. Chesterton has illustrated the matter well when he said, "If I wished to dissuade a man from drinking his tenth whisky and soda I would slap him on the back and say, 'Be a man.' But no one who wished to dissuade a crocodile from eating its tenth explorer would slap it on the back and say, 'Be a crocodile!'"
So here is our central issue. Sexual conduct and behavior in all other matters depend upon one's concept of life, whether existence is conceived to be a divine plan or a mere matter of chance and flux.

Reasons for Choice

May I indicate why I personally choose to believe in the Christian worldview, and why, therefore, I believe that all conduct must be guided by the principles of Christ? To me there seem to be three outstanding facts that need to be considered in framing a worldview, and these are: 1. The fact of value. 2. The fact of order. 3. The fact of Jesus Christ.

First, consider the fact of value. The things that influence us most in life are not those that can be demonstrated in test-tube experiments, or by mathematical equations, or by pure logic. The things that move us most in life are values – matters like beauty, love, honesty, truth, friendship. None of these can be proved as to their priority, but all of us accept such a priority nonetheless. We don't make these values, we only discover them. In a sense they are laws of the universe, and they remind us that we live in a universe, not a multiverse.

Second, consider the fact of order. From the atom to the galaxy, and from amoeba to man, there seems to be a principle of order. Without it there could be no science. We live in a cosmos, not a chaos. Shortly before he died, Einstein said, "Certain it is that a conviction, akin to religious feeling, of the rationality or of the unintelligibility of the world lies behind all scientific work of a higher order."

Third, there is the fact of Christ. Christians believe that personality is the highest characteristic of the universe, and that if there is a God he would be a personal God who would choose to reveal himself in a personal way. The Bible claims he has done this in Jesus Christ. Christ is the only man who has ever lived who claimed to be God incarnate, and yet who has been esteemed sane by mankind. Buddha did not claim to be God, neither did Mohammed, nor Confucius. But Christ did so claim. Christ said, "He that loveth father or mother more than me is not worthy of me: and he that loveth son or daughter more than me is not worthy of me." He said that unless a man hated his own life in this world, so far as it conflicted with right, he could not be his disciple. He said, "Except ye believe I am he, ye shall die in your sins." He claimed to be our Creator and Judge, as well as our Savior. And the strange thing is that his knowledge of life, his knowledge of man, his knowledge of the future, indicates that he was what he claimed to be. He pierced the veil of the future, and foretold the fate of his own countrymen, his own disciples, and the world. Read Luke 21:24 (which asserts that after their rejection of Christ, the Jews would be counted as gentiles by God, and their capital city would never again be permitted to be the center of his church on earth) and Matthew 24 (which outlines the continuing persecution of the Christian church and the woes descending on the world as a result).

Christ's Influence

Then Christ foresaw his own influence. He said, "Heaven and earth shall pass away, but my words shall not pass away" (Mt 24:35). He foresaw his own impact on men through the centuries and the spread of his gospel; and on one occasion when a prostitute anointed his feet, he had this to say: "wheresover this gospel shall be preached in the whole world, there shall also this, that this woman hath done, be told for a memorial of her" (Mt 26:13). Christians believe that this One, that is, God, made the future, and for this reason, they accept his guidance in all matters of life, including sex.

It should be said from the start that Christ did not look upon sexual sins as the worst. In his sight a self-righteous, cold, religious prig, who attended church every Sabbath, was much nearer to hell than any prostitute. The Bible makes it clear that the sins of the spirit, such as pride, envy, and hatred, are worse than the sins of the body. Nevertheless, the Bible warns against sexual immorality, by which it means any indulgence of sexual passions outside of their lawful use in the marriage relationship.

Christ put his seal on the marriage covenant when he quoted from the story of creation, and said that "he which made them at the beginning made them male and female," "for this cause shall a man leave father and mother, and shall cleave to his wife, and they twain shall be one flesh" (see Mt 19:5, 6). As far as Christ was concerned, sex was a privilege just for marriage. And it was a privilege that was wholesome and good, for it was invented by God, not by the devil.

Sex, according to the Bible, was intended to teach us to be like God, to teach us to share, to give, and to love sacrificially. God could have made us like a row of ninepins, able to knock each other down, but not able to help each other up; but instead he invented the family relationship, and sex that undergirds it.

Christ set his seal upon the Ten Commandments, and perhaps you have noticed that only two of these commandments are positive: one of them relates to worship – the fourth commandment; and the other to sex and the family – the fifth commandment. The fact is, that all morality and right behavior grow out of these two institutions of worship and the family.

Automatically Obliged

Because God made us, we are automatically obliged to keep the first four commandments regarding worshiping him in spirit and in truth and reverencing his name and his day. Second, it is in the family that we learn how to treat each other properly, and the principles of respect, love, purity, honesty, truthfulness, and contentment that are set out in the last six commandments are first practiced within the family circle. God meant that sex should lead to the greatest of all schools – the home – and that here we should learn the laws of life. To violate either of these institutions, worship or the family, is to dissolve the whole fabric of moral obligation. This is why the Bible is so insistent on the right use of the sexual privilege.

The statement Christ quoted about marriage, "they twain shall be one flesh," shows that as far as God is concerned, a man and a woman become married, not by any statement from a minister, but by physical union. This viewpoint is representative of the whole of Scripture. The Bible does not teach, as some have affirmed, that sex is sinful inside marriage as well as outside. Anyone who says that, just has not read the Bible. In 1 Corinthians 7:5, Paul, the apostle, plainly said that the sexual privilege was not to be interrupted except for temporary periods of special religious devotion. The New Testament declares, "Marriage is honorable in all, and the bed undefiled: but whoremongers and adulterers God will judge" (Heb 13:4). Let me repeat, the Bible does not teach that sex is anything other than a glorious and wholesome thing when rightly used within the marriage covenant.
When we thus consider what the Bible has to say about sex, it is obvious that either the Bible is very wrong, or that our present instinct and use of sex is very wrong. I believe that the second is the case. C. S. Lewis put it this way:

You can get a large audience together for a strip-tease act – that is, to watch a girl undress on the stage. Now suppose you came to a country where you could fill a theatre by simply bringing a covered plate on to the stage and then slowly lifting the cover so as to let everyone see, just before the lights went out, that it contained a mutton chop or a bit of bacon, would you not think that in that country something had gone wrong with the appetite for food? And would not anyone who had grown up in a different world think there was something equally queer about the state of the sex instinct among us?

A well-known film illustrates how very far wrong our sexual instinct has become. In the film, *La Dolce Vita*, the characters are chosen from the elite set in modern Rome and traced through an average twenty-four hour period of obscenity, debauchery, and lewdness. In what is almost the final scene a dozen or so people sit in a room staring blankly at one another. They are completely bored, for they have run out of things to try in the game of sex. Every woman is so familiar with every man in the room that all sit silently in utter disgust. They seem to have reached the end of the line. This is the way of unrestrained passion, and men and women find by experience that life is a concertina that can be pressed in and lived ecstatically for a short time, or expanded and lived at a more natural rate for a much longer, more enjoyable and rewarding time. The fact is that all high and intense delights are brief, they take the edge off other pleasures, and by repetition such delights lose their relish, and furthermore, there is a diminishing return for ever-increasing expenditure. These are the laws that govern all intense physical indulgences.

The American Jefferson noticed this when he went to France, and while in Paris in 1785 he wrote: "Conjugal love, having no existence among them (the French nobility), domestic happiness of which that is the basis is utterly unknown." He declared that the French nobility were so trapped in evil passions and pursuits that they experienced "moments of ecstasy, amidst days and months of restlessness and torment." Today, also, love is not so much the search for a mate, but the search for an orgasm more apocalyptic than the one which has preceded it. Furthermore, those who are pursuing sex as a supreme experience are in danger of graduating to narcotics in a frantic search for bigger "kicks."

**Physical Union**

As far as the Scriptures are concerned, physical union is meant to be the outward sign of spiritual and mental union. Oneness of body is meant to symbolize oneness of heart and mind. Oneness of body is wrong for all those who are not first one in heart and mind.

In Rostand’s play, "The Last Night of Don Juan," the devil comes for Don Juan dressed as a puppeteer. Don Juan pleads for mercy. "I am innocent," he says, "because I sincerely loved all the women I ever had." And so he begs the devil to call the women back to testify on his behalf.

Satan does this. However, he has each one wear a tiny mask over her eyes. Each woman comes to Don Juan and speaks to him, and he has to reply by calling each by her right name. But not once can he get the right name for the woman standing before him. He not only never loved the women he knew; he never really knew the women he knew.

Thus, Don Juan had lost all respect for each woman that he was supposed to have loved, and in so doing he lost respect for himself as a person. That is why Satan came dressed as a puppeteer. Don Juan had lost control of his own life, and he had lost his identity as a person. He had become a puppet and was completely controlled by his own appetites.

It is an absolute illusion that there is any such thing as complete freedom. The truth is, that to remain alive, everyone of us must be tied to something else. The tree is fastened to the earth, and if someone “frees” it by pulling its roots from the ground, it is freed only to die. In order for any of us to remain both free and living, we must be tied to something life-giving. The Bible declares that that something life-giving is God himself.

Once indiscriminate sexual activity was a fearful thing because of the dangers of detection, infection, and conception. These fears have been dissolved in turn by the motor car, the sulphur drugs, and the pill. But the blemish on the conscience remains.

If, as the Bible declares, we are not our own, then neither is our conduct to be self-motivated. To indulge self at the expense of right is to bring remorse upon one’s own soul. Sex uncontrolled deceives and goes on deceiving. A girl may say, "I know he really cares for me." But what if tomorrow she were paralyzed from the waist down and had to be pushed around in a wheelchair? How long would he remain interested in the relationship? The fact is that every woman wants more than sexual thrills; she wants security. That is why, as far as the Bible is concerned, sex must always be linked with marriage and the home.

Every man has in his own heart a Jezebel and a Madonna, and he must choose which he will indulge. He must choose whether he will treat a woman as a thing, like an orange to be squeezed and then thrown aside, or whether he will treat her as someone of the same genus as Mary of Nazareth who went down into the valley of the shadow of death in order to bring forth life and fruit.

Sex is not irresistible. Every day we must resist our passions and our instincts, including not only sex, but anger, selfishness, etc. To refuse to deny our impulses would be to place ourselves in an asylum or a jail. A kite rises by resistance to the wind, and character is developed the same way. We all begin life with an unorganized mob of instincts, and character develops by control of these instincts. But only in Christ is there control.

**Women Should Realize That:**

When a man really loves a woman, he wants her for a wife.

Although men may try to seduce others, they do not wish to seduce the woman they love.

Whatever may be said, men tend to think of virgins when they think of marriage.
The result of experiment is often a forced marriage in which the woman feels cheated and the man trapped. Another result may be resorting to abortion through which scores of women lose their lives every year, and for every woman who dies, several are disabled or rendered sterile, the psychological effects often being far more drastic than the physical.

A man wants a wife who will be faithful. Here the Kinsey Report, whatever its deficiencies, suggests that girls with premarital experience are twice as likely to be unfaithful to their husbands after marriage. The Chesser report suggests that the women who ultimately make the best marital adjustment are those with no premarital experience.

Thus, nothing we know gives any justification for saying that premarital experience helps either men or women to achieve greater marital happiness.

Men Should Realize That:

Nine-tenths of the exploits recounted in the male group are not exactly as the narrator would suggest.

If a man makes a girl "secondhand," trust between them begins to erode from that moment.

A man has just as much to learn about the techniques of refusal as a woman.

A woman is a person whose integrity or wholesomeness demands respect. Conscience is a focal point of integrity, and to attack a girl's conscience is unworthy of a man.

No man ever died of continence. A good deal of nonsense is talked about repression, but if you know what you are doing, this becomes "self-control" which has enabled the race to achieve some of its greatest triumphs.

The flesh, being the animal part of us, reacts as does a lion to its trainer. It reacts immediately to a stern and determined command, but show a sign of weakness and it will devour you.2

Everyone of us is the parent of one of the following four children:

1. The child that never was (that is, the desired-for child that is never born, because marriage or fertility is impossible).
2. The child that was (a child that has been born, but lives no longer).
3. The child that is (that curious combination of energy and curiosity and enthusiasm).
4. The child that is to be. Because many reading this are parents of the child that is to be, may I say to you that if you are careless in choosing the mother or father of the child that is to be, you do a greater harm to that baby than if you placed your heel upon its infant face and ground its features into pulp.

SUMMARY

Every healthy person is frequently attacked by sexual temptation.

Control of the sex instinct begins with the mind and the eyes.

Only the Christian has all the resources necessary for leading a pure life and, therefore, a healthy life.

Those who depend upon intense delights, as in sexual activities, rob all other delights of their joy. Furthermore, they will soon find that increased expenditure is required for diminishing returns.

Men who will make good husbands have no wish to seduce the woman they love.

Whatever men say, they still tend to think of virgins when they think of marriage.

A man has just as much to learn about the techniques of refusal as a woman.

Premarital activity detracts from the likelihood of a happy marriage.

Physical oneness is meant to be the outward sign of a prior-achieved temperamental and idealistic oneness found in marriage.

REFERENCES

1. C. S. Lewis, *Mere Christianity*, p. 89.
2. These points are taken from an address by Bishop Ian Shevill.
CHAPTER 33
The Christian View of Marriage

For many, marriage is not bliss but blitz. But a Christian marriage is the most blessed relationship on earth. It is rightly lived primarily in the will and not in the emotions. Luther perceived marriage as not intended to ruin us by making our lives soft – it is "a school for character."

* * * *

The snail is a hermaphrodite: male and female are incorporated into one; there is no he and no she. Perhaps that is why snails are so sluggish; they have nothing to stir them, nothing to fight for, nothing to pursue, nothing to win.

James Kemble, Hero Dust, p. xiii.

* * * *

All men rule over women, we Romans rule over all men, and our wives rule over us.

Cato

* * * *

Around Camata, if a boy ... wishes to take notice of a girl, he picks up a hand full of fine earth or dust and throws it at her. This is a first step of courtship ... The next time they meet, the boy picks up some fine gravel, and the girl may do likewise. If they continue to be interested this goes on until finally they throw rocks at each other. (Weston LaBarre, "The Aymara Indians of the Lake Titicaca Plateau, Bolivia."

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Husbands, love your wives, as Christ loved the church and gave himself up for her ... that each one of you love his wife as himself, and let the wife see that she respects her husband.

(Ephesians 5:25, 33)

* * * *

My trouble was – I was always in love with being in love.

Bette Davis

* * * *

When All Else Fails

What the Traditional Romances in Novels and Theaters Forgot to Say

We link sex and marriage, for God did so in the beginning. Ever since, many have tried unsuccessfully to separate them in a variety of ways. None of these ways work. Life must be lived according to the Designer's directions – when all else fails, try them.

Not all realize that the physical union of a male and female is legitimate only if it is the outward sign of a previously contracted union of mind and heart. At that point when this union is confessed before others by what we call the marriage ceremony, the physical union becomes legitimate and even more than that – mandatory.

But what if these two things are reversed, and instead of sex being recognized as secondary, what if it is made primary? What then? Then life can fall apart.

Desire, when not in its coarsest animal form of mere lust, is part of the glory of the wonder of love – that visitation vouchsafed to men and women bringing them "the days of heaven upon earth." Walking in this glow, it seems to each lover that now they are fully accepted by another and not reproached, the recriminations of their own kind or own heart mean little. They now stride over the earth in three-league boots and not nothing seems impossible to them. At this crucial point of ecstasy, a universal mistake is made, because of a pedagogical feint of our Maker. The aura of the experience we call "being in love," and which more negatively is referred to as infatuation, is an aura which does not linger forever. It does not linger even for all of this lifetime. Sometimes it is dissipated before the honeymoon itself has passed.

It pays to read. Some, for example, have read The Road Less Travelled By and others an earlier, even greater, classic called Mere Christianity. Though by different authors, they say the same regarding our topic in this chapter.

What is it then that our authors say about the experience which finds its acme in the ecstasy of sex? They tell us that it is, as we have intimated, not permanent. It is but the vestibule of real marriage which continues to be characterized by love but no longer by infatuation or ecstasy. That is a hard saying, who can hear it?

Notice the way C. S. Lewis puts it:

People get from books the idea that if you have married the right person you may expect to go on "being in love" forever. As a result, when they find they are not, they think this proves they have made a mistake and are entitled to a change – not realising that, when they have changed, the glamour will presently go out of the new love just as it went out of the old one. In this department of life, as in every other, thrills come at the beginning and do not last.¹
To serve as effectively as it does to trap us into marriage, the experience of falling in love probably must have as one of its characteristics the illusion that the experience will last forever. This illusion is fostered in our culture by the commonly held myth of romantic love, which has its origins in our favorite childhood fairy tales, wherein the prince and princess, once united, live happily forever after.

The myth of romantic love is a dreadful lie. Perhaps it is a necessary lie in that it ensures the survival of the species by its encouragement and seeming validation of the falling-in-love experience that traps us into marriage. But as a psychiatrist I weep in my heart almost daily for the ghostly confusion and suffering that this myth fosters. Millions of people waste vast amounts of energy desperately and futilely attempting to make the reality of their lives conform to the unreality of the myth.²

So what? Having been dampened somewhat by those douches of cold water from our authors, what is the point of Deity’s feint whereby lovers are permitted to believe that the paradise they have entered is forever and one that is better even than Eden – free of serpents?

### Never Give Your Emotions the Casting Vote

The point is that the best love is lived in the will and not in the feelings. The point is that married love is a mirror of the love between the Saviour and the saved. That relationship also is one chiefly preserved by choices rather than emotions.

In most marriages there come dry spells, or storms. In our age where no-contest divorce is the rule in western cultures, temporary aberration of the emotions often leads to far-reaching, even devastating consequences, for married partners and their children. Those who function chiefly at the emotional level can never have a successful human relationship, certainly not marriage. Even more is this true about Christian experience.

Do you remember Uncle Screwtape’s counsel to Wormwood who is a junior devil trying to corrupt a new Christian?

> Work hard, then, on the disappointment or anticlimax which is certainly coming to the patient during his first few weeks as a churchman. The Enemy allows this disappointment to occur on the threshold of every human endeavour. It occurs when the boy who has been enchanted in the nursery by Stories from the Odyssey buckles down to really learning Greek. It occurs when lovers have got married and begin the real task of learning to live together. In every department of life it marks the transition from dreaming aspiration to laborious doing.³

As spirits they belong to the eternal world, but as animals they inhabit time. This means that while their spirit can be directed to an eternal object, their bodies, passions, and imaginations are in continual change, for to be in time means to change. Their nearest approach to constancy, therefore, is undulation – the repeated return to a level from which they repeatedly fall back, a series of troughs and peaks. If you had watched your patient carefully you would have seen this undulation in every department of his life – his interest in his work, his affection for his friends, his physical appetites, all go up and down. As long as he lives on earth periods of emotional and bodily richness and liveliness will alternate with periods of numbness and poverty.⁴

Lewis tells us the Christian must learn to live the Christian life in the will, not the emotions which are so changeable. This certainly applies to marriage which is so often threatened by storms of feelings.

The Christian view of marriage is that its ideal enshrines all of subsequent life. While the two partners live, the marriage bond is intended to shelter them. It will be a protection against the escalator of their emotional ups-and-downs.

Is it then with marriage quite different to all other areas of Christian values? Is this the one area where failure never takes place or unexpected developments do not shatter what was intended to be unbreakable? How should fellow Christians respond when other believers fall short of the Christian ideal of permanent marriage? Is there no hope for those who thus fail? How should separated partners live?

The difference between rules and principles is that the former change but not the latter, and that the first must always be subject to the second. The nature of God determines all else, and he is love. It is not enough for sincere Christians to attempt to meticulously apply mere rules. They are intended to manifest the maturity that sees beyond rules to principles.

### Marriage Is a Covenantal Partnership Which Ideally Is Lifelong

Christian marriage is a permanent estate, but, of course, the unexpected and the undesired sometimes happen. What was intended to be a lasting bond too often becomes shattered in an imperfect world. But what need never be shattered is Christian compassion. Paul made provision for the exceptions as regards marriage. See 1 Corinthians 7:15. Let none try to be more rigorous than Paul.

Shall this provision for life's unexpected tragedies become the excuse for married partners to defect when pressures come that seem unbearable or when tedium threatens? No, indeed! We have already said that marriage, like the rest of life, should be lived in the will, not the emotions – according to Christian principle and not according to the fashions of this passing world or our own ephemeral desires and gusts of feeling. The "I wills" of Bobbie Burns' poem should be given a double meaning.

> As fair art thou, my bonnie lass,  
> So deep in love am I;  
> And I will luve thee still, my dear,  
> Till a' the seas gang dry.  
> Till a' the seas gang dry, my dear,  
> And the rocks melt wi' the sun:  
> O I will love thee still, my dear,  
> While the sands O' life shall run.
And fare thee weel, my only luve,
And fare thee weel awhile!
And I will come again, my luve
Though it were ten thousand mile.

What then is the Christian view of marriage? It is a partnership devised of God for the purposes of companionship, service, and perpetuation of the race. That is the ideal which Christians should do their utmost to attain, though not all will succeed. Marriage is a blessed privilege that can offer more, much more, than any other human relationship. But marriage is not Paradise; it is a school for character. As an image of something deeper and greater, it tells the truth but not the whole truth. In a mirror what seems the left is really the right.

These are the realities about marriage to which the Word of God points. It is a sacred thing, but it is not and can never be pure Paradise. No human being can be to another what one's Maker alone can be. Each partner is to do with God's help all that can be done to bring heaven down to earth, without forgetting that all, even the best, down here, is but an image of the heavenly and the eternal.

Need the Single Be Sad?

And what of those who for sundry reasons cannot marry? They can have the real thing prefigured by marriage. They can know a oneness with God which no earthly upset can shatter. They can impart and receive that pearl described in 1 Corinthians 13 which sexual love only faintly portrays. At the last great day all will know that the best things down here are like the glories of the rainbow, but reflections of heavenly realities, hints of a splendor which will know no passing. In the world to come, Jesus said there will be neither marriage nor giving in marriage. Where there is no death, there will be no need for birth.

Certainly partners shall be restored to each other, but in a relationship as much transcending earthly marriage as heaven transcends earth. And those who down here had no earthly partner will suddenly find themselves in an eternal ecstasy of love with all created beings. They will never again know loneliness or despair.

Yes, human love is a many splendored thing, but it is only a sunbeam from the sun of the divine Heart, a drop from the ocean of divine Love, a hint of what can never be fully told till time becomes eternity, and all holy dreams become realities.

Set me as a seal upon your heart,
set a seal upon your arm;
for love is strong as death,
jealousy is cruel as the grave.
Its flashes are flashes of fire,
a most vehement flame.
Many waters cannot quench love,
neither can floods drown it.
If a man offered for love
all the wealth of his house,
it would be utterly scorned.

The Song of Solomon, 8:6, 7 RSV

SUMMARY

The physical union of sex is the outward sign of a prior union of heart and mind. Without that prior union, sexual relationships are a lie and must fail ultimately.

The experience of infatuation launches most marriages, but it never lasts – all significant life pursuits must be controlled by the will and not by feelings. Christian partners continue to love whether or not they feel that moment that they are “in love.”

Marriage itself is only a pointer to the one sufficient union – that of the soul with God.

REFERENCES
4. Ibid., pp. 44-45.
For decades, the irreligious have jeered that monogamy is monotonity. Now science warns us that the chief cause of what may be the greatest epidemic the human race has ever known is promiscuity – the multiplying of sexual partners. The second cause is unnatural sexual practices, such as anal sex. There is no such thing as safe sex except for those who choose lifelong fidelity in a monogamous relationship. The third cause, illicit drugs, is also a transgression of the laws of nature and Scripture. AIDS is a graphic illustration of the truth that "the wages of sin is death," and all with functional consciences, who are aware of the death toll of innocents like the newlyborn and hemophiliacs, must protest against the selfish vices that precipitate the present deluge of pain, sorrow, and death.

With the family structure crumbling, morals declined. Rome underwent a sexual revolution. Luxury and sloth replaced the formerly strict family life. The public amorality of the highborn also became a way of life for the middle classes ... a basic flaw marred Rome. The vitality of the family had been wasted. Rome collapsed. Upon its ruin, Christianity began to build.

It was the age of overindulgence. It was the age of tolerance for anything in anybody. It was the age of fear of imposing one's own social values on someone else. It was the age of the trivialization of sex. It was the age of antilibidnacy. It was the age when early teenage sex was commonplace. It was the age when homosexuality came out of the closet and became almost acceptable to those who once found it intolerable. It was the age of easy, irresponsible oversex, abortion on demand, chlamydia, and genital herpes. And it was the age of AIDS.

... because they exchanged the truth about God for a lie and worshiped and served the creature rather than the Creator, who is blessed for ever! Amen. For this reason God gave them up to dishonorable passions. Their women exchanged natural relations for unnatural, and the men likewise gave up natural relations with women and were consumed with passion for one another, men committing shameless acts with men and receiving in their own persons the due penalty for their error.

Flee fornication. Every sin that a man doeth is without the body; but he that committeth fornication sinneth against his own body.

"What's the black spot, Captain?"
"That's a summons, mate."

The Plague!

The African Prelude

Take Africa for an example. AIDS is spreading over the whole of the west and the south, doubling every four to six months in Uganda. Millions are already contaminated and over 50,000 have died. By the year 2,000 it is estimated that half of the sexually active males will have the virus.

The plague strikes both sexes and it is not a homosexual disease in Africa. One reason for this may be that anal intercourse is sometimes used as a means of birth control. On this great continent, thirty countries labor under the burden of AIDS. And at each epicenter, from 15-25 percent of the population is involved. It is probable that lack of hygiene and the use of infected
needles, and also the depression of the immune system caused by malnutrition accelerate the plague. If so, we have a hint of what could take place in the immediate coming years over three-quarters of the globe.

In the USA where excessive food intake, not hunger, is a primary problem, and where modern technology is at its best, it is estimated that over a quarter of a million will be prostrated by AIDS about the end of this decade, with a death toll of the greater part of 200,000. Those now infected in the U.S. alone range from ½ million to 15 million (most popular estimate is 1½ to 3 million). The disease is increasing faster among homosexuals than among the high-risk groups. In five years new cases involving heterosexuals will have soared 1,000 percent. In some centers illicit drugs take precedence over promiscuity as the primary cause.

Within five years virtually everyone who is promiscuous or who uses infected needles will be infected. Thus, the Australian government has declared that 36 percent of its young people between sixteen and twenty-four are in the high-risk category and may die unless they change their habits. No wonder that countries like Japan, China, and Indonesia see travel screening as necessary for all visitors. Those with the AIDS virus will soon not be allowed to travel freely, which includes, for example, about one million New Yorkers.

The full horror of the situation has not yet dawned upon even 1 percent of people. It was only at the end of 1982 that there came the first reported case of AIDS that was possibly related to blood transfusions. Now we know that most American hemophiliacs have the virus. In 1983 we learned that women could transmit AIDS to infants. Not long after that the first instances of AIDS among prostitutes were identified. Since that time there has been an increasing awareness that through bisexuals originally, the heterosexual population is at risk. The most recent word is that the virus may lay dormant for an average of five to fifteen years in heterosexuals and that, instead of 10-20 percent of people with the virus developing full-blown cases of AIDS, the percentage will be 70 to 100 percent. Furthermore, for a great host, dementia, not formerly recognized as a prominent form of AIDS, will precede death.

AIDS Through Casual Contact?

The real trillion-dollar question has yet to be answered – to what degree can casual contact transmit AIDS? Hitherto, experts quoted in the media have denied that casual contact can transmit AIDS. There have been some exceptions. In December 19, 1985, the New York Times ran an edition with headlines screaming that casual contact could not transmit the virus, but in its ninth paragraph admitted that a Boston test showed that eight out of eighteen AIDS patients examined had the virus in their saliva. Life magazine, midway through 1985, put on its front cover “Now no one is safe from AIDS.” The Lancet has published that the virus can live outside the body for days despite previous denials, citing a letter from researchers at the Pasteur Institute of France. Statistics provided by the Centers for Disease Control tell us of 6 percent with AIDS who are not in any identifiable risk group, and the Journal of the American Medical Association in May 1983, warned that those caring for AIDS patients are at greater risk than other people. Gays themselves have published guidelines to prevent the acquisition of the virus through ordinary household contact. Such guidelines warn against the exchanging of razors and toothbrushes and call for the use of strong bleach in cleaning up blood, urine, stool, or vomit. These and other pointers suggest that more information is needed in this vital area. The evidence indicates that casual transmission is rare but not impossible.

More and more researchers are declaring that promiscuity, along with infected drug needles, is a major source of the AIDS epidemic. Time magazine quoted The Nation approvingly when it declared that the spread of sexually transmitted diseases “may be a prime mover in helping to bring to a close an era of mindless promiscuity.” It is clear that it is our current sexual practices that constitute the real epidemic and STD’s such as AIDS are only the symptom. (This has been recognized by many within the gay population itself.) Read, for example, books such as The Plague Years, by Donald Black, and AIDS – Your Questions Answered, by Richard P. Fischer. See also the protests of novelist and playwright Larry Kramer. In his novel Faggots, Kramer suggested that the gay population by its licentiousness was destroying itself. Since then, AIDS has given his prophecy high credibility.

Some warned Kramer that he should not tell people how to live. He replied, “Stop that! Of course we must tell people how to live or soon there will be no people left alive.” Such writers have pointed out that it is no coincidence that the thickest cluster of AIDS cases is to be found in those cities where sexual activities are the most promiscuous. Never before in history has there been such a concentration of homosexual activity as in San Francisco, New York, and Los Angeles, where the homosexual bars act as whorehouses. Here one man (the passive partner) may have as many as twenty partners a night. This accounts for the multiple rates of infection in America compared with that of England where such commercialized activity is not possible. Homosexuals with many partners are much more at risk than homosexuals who cling to a single partner. It is not the fact of homosexuality that necessarily precipitates AIDS, but the practices and promiscuity of many homosexuals. Unnatural, kinky ways of practicing sex, and the multiplying of partners precipitate the deadly plague.

Physiologists point out that the cells lining the anus are much thinner than those of the vagina. The former was not constructed for purposes of sexual intercourse, and when used, the thin, protecting skin wall is easily broken, and the virus quickly reaches the bloodstream. When magnified, the skin of the anus, subjected to sexual activity, looks like a mine field of World War II. Practices that involve oral sex multiply the likelihood of contracting STD’s, including AIDS. Even homosexuals have warned one another not to brush their teeth too vigorously before practicing oral sex. Wherever the skin is ruptured, there the virus can find access.

Pharisees Are Worse Than Harlots

Christians who often freely condemn homosexuals need to remember that the New Testament does not consider the sins of the flesh as those of the first magnitude. Sins of the spirit occupy that place. It was Christ who said: “The publicans and harlots go into the kingdom of God before you [Pharisees].” In God’s sight, selfishness and pride are worse than carnality and profligacy. We are so self-righteous that, unless Scripture had said so plainly, we might never have believed this.

Sin, however, remains sin regardless of its dimensions. Paul, the apostle of grace, is scathing as he rebukes all who willfully and carelessly pursue the sins of both flesh and spirit. There is no way of dodging his indictment of actively pursued
homosexual gratification (see Rom 1:26, 27). He speaks of those who receive in their own bodies the appropriate recompense of their licentiousness. But God be praised, he also makes it clear that such may repent and find acceptance with God and eternal life (see Rom 1:16, 17 and 1 Cor 6:10, 11). By “effeminate and abusers of themselves with mankind” Paul is referring to the passive and active partners in homosexual activities.

Here, again, a caution is needed. Because of the atonement of Christ, none of us is condemned for his sinful nature, but only for sinful choices. Thus, so-called “straight” males and females regularly are tempted by immoral desires, yet there is no condemnation when such temptations are rejected. It must be stressed that the same is true of those who by nature find themselves homosexual through no fault or choice of their own. The view that all who have homosexual inclinations are guilty of having themselves precipitated that condition is erroneous. The evidence is overwhelming that a large proportion of the homosexual population have had that predilection thrust upon them by possible generic factors, or abnormal backgrounds, especially instances of unusual relationships existing between parents, or parents and children. If ever Christians should be slow to mount the judgment seat, it is in this matter. There are many Christians who find in themselves homosexual preferences yet who treat these as temptations to be rejected. For such there should never be condemnation. Both New and Old Testament condemnations of homosexuality have to do with overt participation.

C. S. Lewis says to nonpracticing homosexuals who are Christians:

But if you are a poor creature – poisoned by a wretched upbringing in some house full of vulgar jealousies and senseless quarrels – saddened, by no choice of your own, with some loathsome sexual perversion – nagged day in and day out by an inferiority complex that makes you snap at your best friends – do not despair. He knows all about it. You are one of the poor whom He blessed. He knows what a wretched machine you are trying to drive. Keep on. Do what you can. One day (perhaps in another world, but perhaps far sooner than that) he will fling it on the scrapheap and give you a new one. And then you may astonish us all – not least yourself: for you have learned your driving in a hard school. (Some of the last will be first and some of the first will be last.)

Heterosexual Promiscuity the Chief Cause of the World Epidemic

But the plague unleashed upon us cannot be blamed upon homosexuals or drug addicts. It is the fruit of decades of widespread sexual license chiefly of heterosexuals. In earlier centuries, fears of detection, infection, and conception restrained many from unchaste behavior. Medieval preachers often declared that were it not for the threat of disease, immorality would multiply at a fearful rate. That prediction has now been fulfilled. Through the inventions of the motorcar, sulfur drugs, and the contraceptive pill, the ancient fears were banished and caution thrown to the winds. Thus having sown to the wind, we are reaping the whirlwind.

But it has now become obvious to even the dullest mind that the universe is on the side of sexual purity. In other words, it reflects its Maker’s mind, intention, and character. The curse causeless does not come. We, of course, generalize, for as in all instances of evil, innocent people also become involved and are hurt through no fault of their own. It was not only the Nazis who suffered during the bombing of Germany and the invasion of allied armies at the second front.

Scripture affirms that “... when thy judgments are in the earth, the inhabitants of the world will learn righteousness” (Is 26:9). It may be that the greatest religious awakening the world has ever seen will come in its blackest hour.

Mankind’s great problem is not just its sinfulness but also its stupidity. Philosophers declared millennia ago that high and intense physical delights suffer from three overwhelming drawbacks: 1) They are short-lived; 2) There are diminishing returns for increasing expenditure; (repetition brings monotony and then distaste); 3) all other normal pleasures are robbed of their delight. What the philosophers failed to add was that when intense delights are taken unlawfully, the result is always great pain and sorrow. As gay novelist Kramer has written to his fellow gays: “You can’t do what we have done all these years and not get into trouble.”

After relating his own experience – first “crabs,” then gonorrhea, then hepatitis, then amoebas, Kramer protests that the gay doctors who were treating their fellows never ever said “Cool it, fellows.”

The Flesh Can Never Satisfy the Soul

The human heart which was made for God is constantly trying to satiate itself with things. “Just stay a little longer” it whispers. “Just a little longer, one more orgasm, one more snort, one more drink, one more kinky practice – just stay a little longer and you will be satisfied. Then everything will be revealed.” That Donald Black is right, every man’s experience testifies.

Is it true that the straight majority need have no anxieties regarding AIDS? While it is true that a chaste life-style removes most of the danger, it is also true that there, as in other instances of sin, there is vicarious suffering for the innocent. The following five areas concern all men and women whatever their sexual style or preferences:

First – burgeoning insurance premiums. The average AIDS patient can incur between $50,000 and $150,000 in hospital expenses. For some insurance companies, AIDS cases already total 3 percent of all their claims and it is growing. Unless there are drastic changes, this crisis could force health insurers into bankruptcy, and in the meantime it is going to raise insurance rates dramatically.

Second, blood banks are drying up because AIDS jeopardizes the supply. People are afraid to give blood because they erroneously think there is a risk of becoming infected in the process. Those in the high-risk group should never give blood, though, because of AIDS, the need for blood is increasing.

The next great problem is that the whole American economy is threatened because the proportionate relationship between the producers of society and those who are retired is in danger of drastic change. This will jeopardize the whole Social Security system. Moody Adams, in his book AIDS: You Just Think You Are Safe, quotes Dr. William Brandt, former Assistant U.S. Secretary of Health and Human Services, “There’s no way in the world that the health system of this country can support
additional thousands of chronically sick people suffering from recurrent infections for which they must be hospitalized again and again."5

Moody Adams, who very ably sets forth these five major problems, stresses as his fourth point that every life is in peril. He cites David Black's three-part Rolling-Stone feature on "The Plague Years," which predicted that in less than a quarter of a century everybody in the world could be dead. In other words, AIDS could be worse than a nuclear bomb. Adams' fifth point is that other civilizations have been brought down by disease, and that this is no impossibility for America as we contemplate the AIDS-shadowed future.

In a Nutshell

Here are some points in summary regarding the current world situation and certain conclusions that spring from these facts about AIDS:

1. If AIDS continued to multiply at the rate of the last eight years, it would wipe out everybody in America before the end of the next decade, and then everybody in the world within a few more years. This, of course, will not happen because many will change their habits, but the statistics show the urgency of the situation.

2. Between 10 and 20 million of earth's inhabitants already have the virus and the majority of these will die from it.

3. Experts calculate that, particularly in urban areas, a hundred times as many people actually have the virus as have come down with full-blown AIDS.

4. If, as some researchers contend, the AIDS virus can live on without its human host and continue to be infectious for days, even in a dried state, then the whole face of society will be changed to meet that threat.

5. The group at highest risk is between the ages of sixteen and twenty-four. While a grandmother may recall one to three sexual experiences in her lifetime, her daughter is likely to remember ten or more, while her granddaughter, from the age of twelve or thirteen, may be engaged in regular sexual activity. To a large degree that picture reflects most modern countries in the West.

6. Even college coeds may be carrying the virus. Only further research and testing can provide exact figures.

7. The Australian government has recently told its citizens that everybody is at risk. Even marriage does not guarantee heterosexuality or fidelity, and statistics show that approximately one-third of all married partners are unfaithful at one stage or another, particularly before the age of forty. In the USA it is estimated that between 1½ and 15 million people carry the AIDS virus. "Even the most conservative estimates agree that by 1991 AIDS will be one of the worst epidemics in the U.S. history."6

8. The condom is only 80 to 90 percent successful when used to prevent pregnancy. It may well prove even less successful in preventing AIDS. There is no such thing as safe sex, only safer sex, if one forsakes monogamy.

9. There is at present absolutely no way of guaranteeing that blood used for transfusion is AIDS-free. Current tests are more than 99 percent accurate, but perfect screening is impossible because AIDS antibodies do not show up sometimes until six months after infection, and in rare cases do not develop at all.

10. Up to 90 percent of the homosexuals of New York, San Francisco, and other major cities already have the virus, and likewise almost all hemophiliacs who have been receiving blood transfusions for years. Governments have been very slow to intervene in this crisis because, until recently, they believed it was a matter that only concerned minorities such as homosexuals and drug junkies.

11. Today we know that far more heterosexuals have the AIDS virus than homosexuals. AIDS is not a homosexual disease. It has to do, not with one's sexual orientation but with one's sexual practices. Promiscuity is the main cause of AIDS.

12. Ours is an undisciplined age that has clamored for rights without responsibilities, and for privileges without painful striving. Such shortcuts are self-deceiving, and the majority who still pursue them are likely to contract AIDS.

13. Toynbee once commented, "Suppose that in the next generation the ablest minds and the most perceptive spirits were to come to Socrates' conclusion that the most urgent business on mankind's agenda was to close the morality gap." The AIDS crisis demonstrates the urgency of this need.

14. For those people who exclude God, heaven, and the judgment from their reckoning, life becomes flat, dull, cheap, and frivolous, without heights and depths. In such a state, men and women seek "kicks" but forget that these will kick back, even mortally.

15. Governments are afraid that men who know they are marked for certain death will run amok bringing mayhem and anarchy.

16. The sexual revolution, in theory at least, is over. Casual sex is no longer an option for informed people. The one-night stand is finished. Old-fashioned monogamy has been revealed as the only way to go. The Christian view has been validated. Divorce will increasingly diminish and lasting marriage relationships will increase from here on for survivors. Those who learn that they have the AIDS virus should know that, henceforth, they should not have sexual relationships. They are infectious until the end of their days.

17. An increasing number of medical personnel are reluctant to treat AIDS victims. Surgeons are particularly vulnerable.

18. Litigation, with reference to AIDS, will soon multiply with terrible intensity.

Who cannot see that the terrible plague of AIDS is nature's protest against transgression of her laws? To violate nature is to invite judgment. Who also can fail to see that we have, in this awful epidemic, a demonstration of the primacy of preventive medicine? AIDS cannot be cured, and may never be cured according to some researchers. All that can be done, and perhaps all that ever will be done, is to palliate its effects. SO IT IS WITH ALL CHRONIC DISEASES. Chronic disease, as a rule,
There Is Safety Only in Following Our Maker's Directions

As regards AIDS, the preventive approach means either celibacy or monogamy. The first is not practical for most but the second is. Monogamy is endorsed by Holy Writ, and it is so because it is ultimately the happiest way to live. All of God's laws are for our benefit, not for his. Those tempted to immorality should remember that sexual union with any single person is actually sexual union also with all the partners that person has had in the last ten to fifteen years or so, and also with the sexual mates of those partners as well. No wonder that at least one in four people between the ages of fifteen and fifty-four contracts a sexually transmitted disease, many of which cannot be dealt with effectually by modern medicine.

Let it never be thought that sexual urges are irresistible. Those who do not resist the continual flow of inappropriate desires go either to jail or an asylum. We are so made that conflicting desires hamper other desires. This works for good as well as for evil. Surely the desire to be healthy and happy should effectually conflict with illicit sexual desires. But always stronger than such legitimate motives (for self-protection is not to be viewed as egotistical but appropriate, even mandatory) is that of the gospel. Because we are not our own, because we were bought with a price, therefore Christ's love for us constrains us to live to his glory, which living ultimately becomes revealed as also the way of joy.

It remains gloriously true now, as in ancient times, that there is One who receives sinners, and he it was who condemned the Pharisees rather than the harlots. There is hope for all because "All manner of sin and blasphemy shall be forgiven unto men," and "Whosoever cometh to me I shall in no wise cast out" promised the Son of God who loved each one of us as though there were not another person on the face of the globe to love. There is not one harsh syllable in the Gospels from Christ against "publicans and sinners." What an unexpected marvel!

Wise is that person who has learned that all of God's prohibitions are intended for our own good, that he never forbids us anything that would be in our best interest to possess. His prohibitions are in one sense promises. To obey God gladly guarantees lasting joy and everlasting life. He who forbids drunkenness knows that it is the source of disease, family wretchedness, and professional failure. He who forbids covetousness would have us know the joy of contentment. He who enjoins Sabbath-keeping wants to save us from spending our stolen Sabbaths prematurely in the grave. He who ordained purity longs that we might know the lasting pleasures of chaste love, unmarrd by tragedy.

SUMMARY

AIDS is the fruitage of the sexual revolution of recent decades. Estimates differ, but possibly 20 million throughout the world already have the AIDS virus and most will die from it. By the turn of the century 100 million may be dying from AIDS.

There are in many areas, especially cities, a hundred with the virus for everyone diagnosed as having AIDS.

Catching AIDS by casual contact according to our present knowledge, is rare but possible.

AIDS is not a homosexual disease, though at present, in the Western world most sufferers are homosexuals.

All everywhere will ultimately be significantly affected by this plague — financially, socially, culturally, and in a variety of physical aspects.

Most blood transfusions are safe, but that safety cannot be guaranteed at present.

The only safe sex is that between partners who have "always" practiced monogamy.

The divine law of purity is part of the fabric of the universe. To violate it invites destruction.

Christ severely castigated Pharisees but uttered not one syllable of condemnation for "publicans and sinners."

Because many innocents suffer as a result of AIDS, all should do what is possible to restrain and discourage drug addiction and sexual license.

Blacks, Hispanics, and all children and youth are in special need of instruction, because information is a key factor. Here, as in other health matters, the less education the less safety.

REFERENCES

3. See The Nation, November 2, 1984, p. 299, for the original statement.
4. C. S. Lewis, Mere Christianity, pp. 181-182.
5. AIDS: You Just Think You Are Safe, p. 18.

Key Statements from Researchers
... it is probable that, as with so many viraemic diseases, a single virion (virus) introduced directly into the blood will regularly transmit infection.


... Individuals who are infected with the AIDS virus but who demonstrate no visible symptoms are just as capable of spreading AIDS as patients with the full-blown syndrome.


... once a person becomes infected with the AIDS virus, he or she can never engage in intimate sexual activity without endangering the life of another person.

The AIDS Cover-Up?, p. 11.

Mounting scientific evidence indicates that the long-term outlook for all persons infected with the AIDS virus is much worse than was anticipated.

Ibid., p. 21.

The AIDS virus and the visna virus (found in sheep) belong to the family of lentiviruses. These lentiviruses (the name is derived from the Latin lentus – "slow") are called slow viruses because they frequently have a lengthy incubation period before symptoms develop. Apart from the new human form, only three other species of lentiviruses are known: the lentiviruses causing maedi-visna in sheep, infectious anemia in horses and encephalitis-arthritis in goats.

Ibid., p. 22.

The lentiviruses have been largely neglected because they appeared irrelevant to disease in man and could not be transmitted to small laboratory animals. In domestic animals lentivirus infections have proved so lethal and unresponsive to treatment, and vaccines have proved so useless, that slaughter of infected animals has been the universal means of control.


... The incubation period of AIDS-induced brain disease could range from two to thirty years, with a mean of fifteen years.

Ibid., p. 28.

The involuntary depositing of AIDS virus infected fecal secretions on the benches in locker rooms, toilet seats and elsewhere also creates a potential for spread by this route.

Ibid., p. 36.

AIDS-infected saliva also is a potential danger involved in oral copulation.

Studies have yet to determine whether or not the gastric juices in the stomach prevent absorption of the potent AIDS virus into the bloodstream after being ingested. Since the eating of AIDS-infected meat is a possible factor in the spread of AIDS among humans, consumption of infected semen may also play a role in transmission.

Ibid., p. 40.

Worldwide, male cabin attendants (in airplanes) are often homosexual.

Cited from The Lancet, Ibid., p. 47. See also The Lancet, October 17, 1981.

Defining acts such as sodomy, fisting, anilingus etc., as being unnatural is not a matter of homophobic prejudice. Empirical medical evidence clearly demonstrates that the rectum is not designed for intromission of actual or makeshift sex organs ...

Ibid., p. 57.

The degree of promiscuity in the baths defies the imagination of those not familiar with homosexuality. From the point of view of traditional values, they are probably some of the most destructive and degrading institutions in America today ... From the medical point of view, the baths constitute a major focus for the transmission of disease. Psychologically, they constitute the antithesis of mental health. Ethically, it is difficult to justify the impersonality and degradation they institutionalize.


Because data on HTLV-III test sensitivity are lacking or incomplete, all we can conclude is that the blood is now safer than it was before, but just how safe is unknown.


In twenty years, a significant portion of our society could be incapacitated. We could end up with two societies – those that have it and those that don't.


To date, almost half of AIDS victims have come from New York City, San Francisco and Los Angeles. But what has been largely a tale of three cities will not remain so for long. By 1991, 80 percent of the total number of AIDS cases are expected to come from elsewhere.

Ibid., pp. 62-63.

In New York City, where the disease has progressed the furtherest, an almost equal ratio of male and female military applicants are showing signs of the infection.
If a vaccine does not appear until the turn of the century, the death toll could be in the tens of millions. And so far there's no evidence that AIDS will die on its own.

It will cause such a significant amount of disease in the middle ages of the population that it will largely reduce the number of people available to carry out the functions of the society. In parts of Africa, it's happening already.

(AIDS expert, David Baltimore).

The danger which the virus now poses to anyone who has sex spells the end of an era. Promiscuity is simply no longer "cool"; it has instead become a deathtrap. Ita Buttrose, Chairperson of Australia's National Advisory Committee on AIDS, expressed a widely held belief when she told a gathering of medical experts and media people at Melbourne University: "The sexual revolution is just about over. The risk of AIDS combining with existing fears of other sexually transmitted diseases and genital herpes, has put a curb on the galloping sexual freedom of the last twenty years."

Graham Hancock, AIDS: The Deadly Epidemic, p. 48.

The precautions taken by dentists and surgery personnel, though they also entail the wearing of masks and gloves, are based on scientific fact. These professionals do come into contact with patient's blood, one of the main vehicles of the AIDS virus. The General Dental Practitioners Association in the U.K. recommended in December, 1985, that all dentists wear eye protection to ensure that safety standards are as high as possible. In the U.S. the Centers For Disease Control made a similar recommendation early in 1986, that dentists wear masks, goggles and gloves to protect themselves and their patients from possible infection. Dentists already were, and still are, among the groups at greatest risk of infection by the hepatitis-B virus, which is also blood born and which could cause fatal damage to the liver.

Ibid., p. 63.

If ever human beings need proof that they are still tied tightly to their biological mooring; if ever they are tempted to believe that by their cultural achievements, their creation of literature, music, architecture, and space travel they have transcended the swamp from which their ancestors rose millions of years ago, they should visit the AIDS ward of the hospital and see the devastation and havoc wrought by microorganisms that have made their homes in our bodies since time immemorial. When they see fungus in a person's eye and see him bleeding from every place that it is possible to bleed from; when they see and hear strong, healthy people in the prime of life vomiting blood, losing their hair and being transformed into wizened bags of skin and bone within a matter of months, then they will understand the extent to which human dignity is still at the mercy of minute specks of mindless matter.

... The sight of professional scientists, artists, businessmen, farmers, pastoralists being reduced in such an ignominious way to listless cadavers slithering in a stench of incontinence is more than enough to bring home the indiscriminate nature of this disease. It respects no international borders, it is not confined to any particular race, and it doesn't give a damn about a person's social status or sex.

Ibid., pp. 22, 23.

Even the healthiest person thus harbors a host of dangerous pathogens long dormant and waiting for their chance. If people generally had any inkling as to how improbable their good health is, how close to the doors of pain and death they are actually living, they might take a dimmer view of the ways in which they habitually insult and injure their immune systems. Smoking cigarettes, boozing too much, not eating sensibly, too many late nights in succession -- these are all unnecessary challenges to the body's immune system which put it on overload and distract it from the crucially important task of keeping the restless microbes in check. The belief is evidently widespread that the swamps where diseases breed are in undeveloped parts of the world, in hot tropics without air conditioning, in the fever-lands, that in colonial times used to be the "white man's graveyard." Wrong. Abjectly mistaken. Each person takes with them their own swamp wherever they go.

Ibid., p. 58.

... Orgasm might well set in train a process that led to the isolation ward and to the scenario in which undertakers refuse to touch the body. Images of a black plastic bag tied with string were not the best inducements to prove how free one was. Never before had the pleasures of sex been so closely and grimly associated with death. How completely the world had changed since the sex symbol Marilyn Monroe used to sleep with photographers in order to get publicity pictures taken. "It was no big deal," she said later. "Sex never gave anybody cancer."

Ibid., p. 48.

Britain has been warned today that AIDS will become the greatest killer plague since the Black Death.

Two million people in Britain will have died from AIDS by the end of the century, according to Health Report.

A three-month study by Dr. Marvin Schweiger, a community medicine expert in Leeds, predicts that 100,000 in this city will be infected by the year 2000 and nearly one-third of them will be dead or dying.

Dr. Schweiger said, "If the figures were reflected nationwide there would be 7 million infected people and 2 million would not survive."


Worldwide, heterosexual intercourse is the dominant mode of transmission and, although the first cases of AIDS in the west did appear among homosexuals, this is probably because gay men tend to have had earlier exposure to diseases like hepatitis.
that also compromise the immune system. Because of this, gays succumbed to the new infection more quickly than 'straights' whose immune systems were generally in a better state of repair. More than five years into the epidemic, however, AIDS is now being diagnosed — and it is spreading rapidly — among heterosexuals. The latest medical thinking is that the virus may have been present amongst heterosexuals from the very beginning but simply took longer to express itself as the full-blown disease. Gays are thus more accurately thought of as a 'sentinel group' for the epidemic than as its originators.


AIDS is now entrenched in virtually every country of the Third World, where resources to fight the disease — either through educational campaigns, medical treatment, or research — are at their most limited.

It is significant that the first AIDS cases in India appeared among poverty-stricken women working as prostitutes in order to support their families. Having gained a foothold among India's 750 million people, the virus is said to have spread rapidly throughout this continent. Part of the reason is that over 50 percent of the country's blood supply comes from desperately poor people who sell their blood to survive.

But it is in Africa that the AIDS epidemic found its most virulent and life-threatening expression. Even if a maximum effort were made — both by the countries immediately concerned and by the international community — hundreds of thousands, possibly millions, of Africans would still die.

All evidence suggests that the disease is out of control, that Africa is now irrevocably set on a course for a health disaster of biblical proportions.

Ibid., p. 8.

WHO's (World Health Organization) 100,000 dead or dying from AIDS today, become 10 million dead or dying by the year 2000 — altogether different ball game. And WHO's figures are conservative. Research in Africa suggests strongly that 10 percent of the 100 million population of the worst-affected central zone are now HIV carriers — in other words there are 10 million infected in central Africa alone. Add to this the infection in the rest of the world (including the U.S. with an estimated 2.6 million carriers) and you get a global figure of 15 million or more HIV-positive individuals. All these people are infectious as well as infected, passing on the virus to others with whom they had sexual contact. So 15 million infected today implies a great many more infected a year from now and even more the year after that. Indeed, WHO estimates a world total of 100 million infected within five to ten years.

Ibid., p. 5.

It will increasingly afflict educated, information-receptive homosexuals. It already is disproportionately, and will increasingly be, a disease of inner-city blacks and Hispanics.

Blacks and Hispanics, who constitute 11 percent and 8 percent of the population respectively, are 25 percent and 14 percent of AIDS patients. Those percentages probably will rise because AIDS is a behaviorally based disease and will disproportionately afflict those inner-city classes least efficient at acquiring and acting on information.

Americans have a technology fixation generally. Regarding health, their thinking is shaped by the polio paradigm, the conquest of disease by Dr. Jonas Salk's silver bullet. But America's principal public-health problems flow from foolish behavior regarding eating, drinking, smoking, driving — and, with AIDS, abuse of the body, especially the rectum.

Journalism seems reluctant to clarify that the primary reason for the AIDS epidemic is that the rectum, with its delicate and absorptive lining, is not suited to homosexual uses. The nation needs unsparing journalism of the sort found in the Chicago Tribune Magazine of April 26:

Eighty-one point five percent of the second cluster of AIDS patients had engaged in the practice called 'fisting', which causes rectal trauma, in the years before they fell ill. The researchers defined fisting as the insertion of a portion of the hand — or even the entire fist — into the anus of another person. The 27 men studied had a median of 120 sexual partners during the year before the onset of symptoms, with one man reporting up to 250 sexual partners in each of the three years before symptoms.

The rate of heterosexual transmission is increasing primarily among black and Hispanic teenagers whose sex partners are intravenous drug users. New York City has one-third of all AIDS cases; 36 percent of the city's cases are IV drug users. Half of the city's 200,000 addicts are thought to be infected with the AIDS virus.


Voluntary testing of all sexually active adults for antibodies against the causative agent, human immunodeficiency virus (HIV, formerly HTLV-III/LAV), in conjunction with counseling and unequivocal "standards" for safe sex, is a first step...

... even among the highly educated and motivated cohort of homosexual men whom my colleagues and I have studied in New York City and Washington, D.C., 48 percent continued to have anal sex in 1986 (unpublished data). Much recent emphasis has been placed on condoms, and there is little doubt that meticulous use of condoms can reduce the transmission of HIV. However, 77 percent of the men in our studies who practiced anal sex in 1986 did not use condoms (unpublished data). Furthermore, it has recently been shown that condoms failed to prevent HIV transmission in 3 of 18 couples, suggesting that the rate of condom failure with HIV may be as high as 17 percent (and Fischl MA: personal communication). It is clear that the use of condoms will not eliminate the risk of transmission and must be viewed as a secondary strategy.

The primary emphasis of education for positive subjects must be on eliminating sexual contact with HIV-seronegative and HIV-unknown persons and using effective birth control to prevent HIV infection of babies. In our studies, we have found no clear evidence that behavior modification lowers the risk of AIDS among those who are already infected.
Reducing risky sex, rather than eliminating it, is like incompletely immunizing a population – there is little benefit to the individual or the community. Undoubtedly, a campaign urging universal voluntary testing and sexual standards would provoke debate, but this debate would bring “risk elimination” into the vocabulary of communities of all types, those with a high incidence of AIDS and those with a low prevalence of HIV.

Sex with a prostitute may be riskier than sex with a neighbor, but if neither has been tested for HIV then neither can be considered truly safe.


*English hoarding:* AIDS: Don't die of ignorance. Gay or straight, male or female, anyone can get AIDS from sexual intercourse. So the more partners, the greater the risk.

We close this series with one more quotation from that book on AIDS which we consider to be the very best available:

It may be begging the question, but it needs to be asked. Is society really better off with:

- a 60% divorce rate
- 1,500,000 abortions annually
- 400,000 pregnancies out of wedlock annually
- 20,000,000 to 30,000,000 cases of incurable genital herpes
- paedophilia, incest and teenage prostitution at epidemic levels
- 3,000,000 new cases of chlamydia annually
- 3,000,000 new cases of gonorrhea
- 1,000,000 cases of pelvic inflammatory disease (PID)
- 100,000s of adolescent girls and women permanently sterilized as a result of gonorrhea-induced PID
- 10,000s of women having developed cervical cancer as a result of promiscuity, herpes and venereal warts
- millions of young men facing a prospect of AIDS death through involvement in homosexuality.

Or perhaps, just perhaps, the millenia-old Jewish and Christian Biblical guidelines have been relevant all along. Bestiality, homosexuality, incest, fornication and adultery are all explicitly proscribed in the Scriptures.


These quotations represent present knowledge about AIDS. But knowledge on this topic is growing at an exponential rate. The next several years will dramatically add to our present understanding.

In view of the current emphasis that there is little risk for heterosexuals not in intimate contact with homosexual/bisexual males or intravenous drug users, the warnings of this chapter against, not only anal intercourse but promiscuity in general, may to some seem misplaced. We would urge, however, that the progressive course of knowledge about AIDS has been like that of a river of many curves, with researchers continually uncertain as to what was coming next. What we do know for certain is that the two distinctive characteristics of the largest AIDS group in this country are anal intercourse and promiscuity, and that recurring STDs depress the immune system and prepare the way for AIDS. Put with that the fact that the largest group afflicted by the modern plague are heterosexuals (Africa), and it becomes apparent that to wait for fullness of knowledge before choosing a conservative sexual life-style could be a fatal error.
CHAPTER 35
The Male Mid-Life Crisis

Most men in their forties find sexual temptation a renewed threat. Only those with strong religious convictions are well equipped to resist this onslaught.

* * *

It caught David and Solomon. One was the man "after God's own heart" and the other was the wisest man living. "... let him that thinketh he standeth, take heed lest he fall."

1 Corinthians 10:12

* * *

No Stage of Life Is Without Its Tests

Life is never easy, and although we may think everyone around us is intensely successful and happy, we don't see the whole picture. No person in the world is perfectly content. No one is ever free of problems.

When a child misbehaves we often say, "Oh, it's just a stage he's passing through." Similarly, many of our own problems arise because we're passing through some stage of personal development.

Our lives can be divided into various stages. These periods have been called the testing teens, the teachable twenties, the terrific thirties, the fiery forties, the forceful fifties, the serious sixties, the sacred seventies, and the aching eighties. When you're young you are sure that life gets better as you get older. But when you're older you are sure that youth was sheer heaven. I've often said we should aim to die young as late as possible!

This article focuses on the specific problem which multitudes of men face at middle age. Professional counselors call it the "mid-life crisis." What is it? The tragedy begins with doubts about one's self, one's wife, one's family, one's job, about God and destiny. For people under thirty it's a myth. For people over fifty it's often a memory. But for men in their mid-thirties and forties it certainly is a reality.

While there's no such thing as a male menopause, there is a crisis between thirty-five and fifty for a large proportion of men. A Christian psychiatrist reading the story of David and Bathsheba would have diagnosed his problem as a mid-life crisis.

Biographies are full of examples of this middle-age madness. Charles Dickens in his forties took a nineteen-year-old mistress and behaved quite out of character. According to some versions of Shakespeare's life, he retired from marital sex before he was forty-five and from work at forty-six. What is definite is that he wrote two plays in which he pictured middle-aged men experiencing sudden transformations of character and life with the result of ruin. The painter Gauguin left his family and a good job to live in the South Seas in his middle years. Dr. Daniel J. Levinson has told us that "Men such as Freud, Jung, Eugene O'Neill, Frank Lloyd Wright, Goya, and Gandhi, went through a profound crisis around forty, and made themselves creative geniuses through it." Then there are others including Sinclair Lewis and Dylan Thomas who were destroyed by their crises.

Dr. James Dobson, in his book Straight Talk to Men, has given good counsel on the mid-life crisis. He quotes the findings of three studies involving more than two thousand people which concluded that 80 percent of the executives between thirty-four and forty-two years of age went through a mid-life trauma. Dobson says these conclusions agree with his own observations and particularly stresses that the problem comes chiefly to those who are highly motivated and successful professional men.

Another writer who has written at length on the topic is Jim Conway. See his volume Men in Mid-life Crisis. Conway is a Christian minister who went through a nightmare of his own but survived. Dr. Dobson's two radio programs on the topic of the male mid-life crisis produced an avalanche of mail and phone calls. Obviously Dobson was scratching where people itched!

But can we define this middle-age dilemma? Dobson says:

"It's a time of intense personal evaluation when frightening and disturbing thoughts surge through the mind, posing questions about who I am and why I am here and what's it all about. It's a period of self-doubt and disenchantment with everything familiar and stable. It represents terrifying thoughts that can't be admitted or revealed even to those closest to us. These anxieties often produce an uncomfortable separation between loved ones at a time when support and understanding are desperately needed."

The Four Major Enemies of the Typical Middle-Aged Man

Dr. Conway tells us that the four major enemies threatening a man in his middle years are his own body, his work, his family, and God. It doesn't take much imagination for those of us who are over thirty-five to fill in the spaces. Someone has joked that the five B's of being fifty are broad, bald, bifocals, bunions, and bad breath. It's not that bad at thirty-five but some of the symptoms do begin not long after.

Men in their forties find they no longer have the stamina they once had. About one-third to one-half of people in this decade have incurable diseases, but not necessarily fatal ones. A man suspects that his male attractiveness is declining rapidly. Keep in mind that even Mohammed Ali retired at thirty-seven. For many men the first hint of heart trouble comes in the middle decades, and males become aware of the time bombs ticking within their own chests.

As for one's work, the realization usually dawns that the original ambitions are never going to be fulfilled. Many a man becomes resentful and feels trapped. But money must be made and so the job must be kept. It's hard not to become emotional in such a situation. One longs for escape and for variety, and too often one is drawn into infidelity.
Infidelity promises but never delivers. It promises to prove to a man that he is still virile, lovable, and attractive. It promises him brightness, variety, and joy. But he's cheated on all counts. Such ventures only result in ultimate disillusionment and heartache. Only those who believe that God is a God of love, and that all his commandments are loving warnings against self-destruction, find safety in the storms of temptation.

It's not hard to fill in the problems that exist in family life for a middle-aged man. At this point of time the demand on his economic productivity is increasing. The children need much more money than in earlier years. His wife may be taking him for granted. Perhaps he even has his parents to care for. No wonder he's tempted to run. If home is always a place of burdens rather than of joys and privileges, he will regret his marriage. If his wife is unaware that most men enjoy being mothered to a considerable degree, she may lose her husband. And if he falls into the old trap of forgetting that "possession brings indifference" and that the furthest fields only seem to be greener, he's heading for destruction. As the manna of old, when used otherwise than God directed turned to worms, so it is with all the pleasures of the senses when used in any other way than in harmony with the law of God.

And then there's a man's problems with God. Poor God! He gets the blame for just about everything. Surely he is the most longsuffering person in the universe. The very reason for our sensitivity to the ills of life is because life, despite its constant problems, is still chiefly good. Most of us have more joy than sorrow, more health than sickness. Quite irrationally we think we deserve and are entitled to a smooth-flowing existence encrusted with gems and surrounded by strawberries. The real fact, of course, is that if we got our deserts they would be hell.

The Only Guaranteed Way of Survival Is the Christian One

Perhaps the underlying cause of the male mid-life crisis is spiritual. If a man already has his eye on eternity rather than time, God rather than man, the service of others rather than the service of himself, the crisis either will never approach him or, should it threaten, will never bear fruit.

The religion of too many of us is a thing of culture rather than of Christ. It is so easy to attend church regularly and yet be controlled by worldly values. The workaholic, the lover of pleasure, the overambitious personality, has not yet found the gospel. The problem of mortality should have been met and defeated long ago. Whoever is not in Christ by a living, abiding faith is dead already. But whoever trusts solely in the merits of the Savior already has the treasure of eternal life (see Jn 5:24).

And as for one's work, the Christian man is more concerned with being faithful than being obviously successful. He can afford to leave the results with God. As a Christian, his work ideally is something that ministers to the well-being of others, and if so, it brings its own reward. It is only the idolator that turns his work into a god and expects it to give him his heaven here and now.

The Christian man has advantages regarding his family also. He doesn't expect perfection in his wife or his children because he can't offer it to them. He knows God has forgiven his sins and, therefore, he has to be in the same business himself, and he will have plenty of call for it. He should know with Martin Luther that "marriage is a school for character." Only idealistic unmarried persons think that marriage is pure heaven. True, monogamy becomes monotonous to the man who thinks all life can be turned into a picnic. But the Christian will thank God for the privilege of sharing his hopes, joys, cares, and obligations with another human being who, like him, seeks to make Christ first, best, and last in everything.

The Christian remembers that life will only work one way – God's way. That way is summed up in the book of Romans, the Ten Commandments, the Sermon on the Mount, the examples of Christ, Paul, and the other worthies of Scripture. It is a way that's God-centered rather than self-centered. It's more concerned with giving than taking. It puts its stress on today rather than regrets for the past or anxiety about tomorrow. It means faith rather than sight, spirit rather than flesh, others rather than self.

It has to be frankly faced that we all by nature are fools. This is why God has given us some guiding rules for living. The guidelines from Sinai suggest that we must reverse the order of men's problems, is still chiefly good. Most of us have more joy than sorrow, more health than sickness. Quite irrationally we think we deserve and are entitled to a smooth-flowing existence encrusted with gems and surrounded by strawberries. The real fact, of course, is that if we got our deserts they would be hell.

Greet every day with both "Amen" and "Hallelujah," with the "So be it" of submission and the "Praise the Lord" of faith and hope. Then every crisis, not just the one in the midst of one's years, will issue in victory.

SUMMARY

There is a crisis between thirty-five and fifty for a large proportion of men. Both Scripture and biography give us many examples. In Dr. Dobson's fine book Straight Talk To Men he quotes the study showing that 80 percent of executives between thirty-four and forty-two years of age went through a mid-life crisis.

The approach of middle life, reduced vitality, failure to achieve life goals, increased responsibilities with diminishing returns, all contribute to the male mid-life crisis.

The middle-aged male needs to remember that the crisis will pass. To surrender can destroy the rest of life.

Only those with their eyes on God, who are aware that they are judgment bound, and who remember that they were bought with a price, will gladly say no to the tempter.

A man in his middle years feels threatened by his own body, his work, his family, and God.

Someone has said that the five B's of being fifty are broad, bald, bifocals, bunions, and bad breath.
For many men the first hint of the approach of death comes in the mid-forties. Infidelity makes promises but never delivers.

The chief cause of the male mid-life crisis is spiritual. If a man has his eye on eternity rather than time, God rather than man, the service of others rather than service for himself, the crisis will either not approach him or not bear fruit.

REFERENCE
CHAPTER 36
One Woman's Pain

PMS can be hell. You may feel dreadfully alone, but there is help available. Here is one woman's story – Gillian Ford's.

* * * *
And there was a woman who had had a flow of blood for twelve years, and who had suffered much under many physicians, and had spent all that she had, and was no better but rather grew worse.
Mark 5:25, 26.

* * * *

The Chameleon

They say it is a woman's prerogative to change her mind. For those who suffer regularly from premenstrual syndrome (PMS), that happens inevitably, radically, and frighteningly every month.

In some cases, PMS can affect a woman from as early as ovulation to as late as the end of menstrual flow. In such severe instances, the woman's life is marred for over half her time.

Some may become so depressed that they feel suicidal, and so irritable and out-of-control that all the family suffers. Such women pick irrational fights, and explode in volatile rages with their bewildered husbands. Some may batter their children, acting in a way which is in direct contradiction to their personal ideals and their best nature.

I suffered from PMS for twelve years, making life miserable for both myself and my family. Now in my late thirties, the problems began way back at puberty. I can remember at thirteen and fourteen, my father saying, "What's got into her now?" as I burst inexplicably into tears over minor incidents. Once mildly rebuked at work for some trivial incident, I wept the whole afternoon.

At age eighteen, I first visited a doctor on account of PMS. I didn't get help. The problem was a nuisance but not overwhelming until I was twenty-six. For about twelve years I had been able to count on my period coming every twenty-five days. Now my cycle became more frequent, so a well-meaning physician put me on the pill. I was only on it for three months, but it had a permanent effect on me. Not only was I continually depressed while on it, but my cycle never reverted to its previous length.
PMS is always more severe if the cycle is longer, and now it was over thirty days every time.

Menstruation became a nightmare because of the terrible depression that hit me towards the end of the month. About days sixteen I felt as though someone had thrown a switch in my body. The first symptom was irritability. I lost all patience and became meaner as the days progressed. The next symptom was lethargy. I spent many wasted hours in bed – not necessarily sleeping – it was a bone weariness which sleep did not alleviate. I had no energy to do anything.

As the month progressed, the next symptom was depression which deepened until a couple of days prior to menstruation. Then I felt as though I was about to descend into a yawning black pit. I wished I had the courage to end it all, but fortunately, I didn't.

A Split Personality

I found going through this month after month extremely hard on my self-confidence. At least half the month I was a split personality, somehow observing myself outside of myself – horrified at how I was behaving, unable to think straight, almost paranoid at times – but totally unable to control this progression. The guilt from being so irritable was terrible. I did not want to be the way I was, yet I was engulfed by it. The only way I survived was that when the end of my period came, and the switch was suddenly flipped back, and the world came right again – I just completely forgot about it. My energy came back. I could conquer the world. I was sweet-natured again. And I tried to enjoy it while it lasted. Underneath, I lived in dread of "the end of the month."

PMS often runs in the family. It certainly did in mine. My mother suffered from such severe monthly migraines that she often longed to die. Another relative once broke her best set of china by throwing it against the wall. She also told me she used to be afraid to go out in the car for fear she would slam it against a brick wall and kill herself.

Difficulty Getting Help

It is the common cry of PMS sufferers that adequate help is very difficult to find. My own experience illustrates this fact.

At the time of my marriage I had been through an unusual amount of change and strain, so it was very easy for doctors to point to this fact and blame the stress I was under. However, this did not account for the monthly pattern of symptoms. I could handle the stress half the month. I couldn't handle anything the rest of the time. It seemed the problems did not have any direct connection with outside events – they were physiologically triggered.

One doctor said to me, "All the strain you have been under has been too much for you, hasn't it?" He, like others to come, looked at the events happening to me, not my biochemistry.

Since I had some vague pains associated with the depression (PMS sufferers get all sorts of twinges at the end of the month), I was sent to a specialist to check if I had appendicitis. He found nothing, and sent me to a psychiatrist, who chain-smoked, quoted Freud, told me what a nice girl I was, and that I didn't have any problems. I went twice and gave up.
Later, I went to a gynecologist who thought I had a swollen ovary. So did her physician husband. They put me in the hospital, did an exploratory operation, and told me they found my ovaries covered with hard sheaths and cysts, and that they had performed a Wedge Resection to invert the ovaries.

Physicians in Australia have since told me there was no way I had that particular operation, even though I had the letter from the surgeon to my general practitioner. I was told such patients are fat, lose their body hair, and stop menstruating. They must have thought I was neurotic, and that to tell me I had had such an operation would convince me I was better. The surgery didn't help. In fact, it caused adhesions which led to further surgery in later years.

One bizarre solution offered me was by a herbalist who said I had hydatids. I was prepared to believe anything. I won't bore you with the amusing details of this "cure."

The first two years of my marriage were spent in the U.K., and we then returned to Australia. My husband had made an appointment for me to see a very prominent psychiatrist. He was a kind man who told me my problem was transference of anger from my father to my husband. He put me on an antidepressant, which appeared to help the first month, but not thereafter, though I persevered for a year. I asked him if a hysterectomy would help. He didn't know. He did suggest that an orgasm would help to release tension.

More than one physician thought I might have endometriosis, a condition where uterine tissue appears in other parts of the body than the womb, the bleeding of which at menstruation causes inflammation and pain. I did not have this condition.

**Suffering Under Many Physicians**

My local physician tried me on a variety of antidepressants for short periods. None helped.

After I had been married for four years, a science teacher at the college where my husband taught gave me a book she had used in her physiology class. It was *The Menstrual Cycle*, by Dr. Katherina Dalton of London. I read this book eight years before being able to get the correct treatment which was mentioned in it.

The symptoms Dr. Dalton described were exactly those I experienced month after month. She spoke of the triad of irritability, lethargy, and depression. I told my husband that this was the first time someone had accurately described how I felt at the end of the month. I felt sure that this was my problem. She suggested progesterone treatment, but it was unknown in Australia. How was I to get it?

Another friend put me onto another psychiatrist, whom she had heard was working in the area of hormones. When I contacted him, he had read literature put out in medical journals by Dr. Dalton, and he agreed to try and treat me for PMS. Sadly, he did not know the difference between real progesterone and artificial progestogens. Progestogens, while they can produce vaginal bleeding like progesterone, are chemically different. They lower progesterone levels in the blood and, therefore, make PMS worse.

The first month, the physician put me on Provera, an artificial progestogen. Provera, as I found out later, is given in Australian mental homes to female patients to act as a contraceptive. They were given one 100 mg. injection which lasted for three months. This guarded against unwanted pregnancies, since their activities could not be monitored.

By contrast, I was given 2,000 mg. in one month! Within twenty-four hours my spirits plummeted, but I determined to stick with it and give it a good try.

It didn't help the PMS. So the next month, I was sent to an endocrinology hospital which my physician had contacted. Yes, they could help me. When I went, I was told we were on the right track, but I had been given the wrong progestogen. They put me on 10 mg. per day of Norethisterone for two months. I got more and more depressed.

Meanwhile, I had written to Dr. Dalton and she very kindly answered me personally. She told me to get real progesterone, saying why the other progestogens would not work. But by this time, the hormones I had taken were playing havoc with me. I menstruated for fifty days continuously. Then every seven to nine days I would start again.

Sitting in a physician's office, I had read a magazine article about Provera and discovered that one 100 mg. injection of it could interfere with the menstrual cycle for up to six months. Shortly afterwards, my physician decided to take me off all hormone treatment. He said he would send me to a gynecologist to handle the menstrual problems. My basic problem, he said, was chronic depression, and not menstruation. I asked him why I was fine part of the month. He told me that I really wasn't well then either. I just thought I was.

After taking the two progestogens, Provera and Norethisterone, I then actually went on to natural progesterone for some weeks. But my cycle was in such confusion that it did not appear to help. That was the point at which I was told I would be taken off all hormones.

If I had gone to see Dr. Dalton, she would have known by the chart of my cycles, and the pattern of the regularly recurring symptoms premenstrually, that I indeed had PMS. My own physicians did not understand the problem sufficiently to help. Often when a patient visits a gynecologist, he sends her off to a psychiatrist, and vice versa.

So, I had almost received help, but was pulled away from it before it was given time to work. The psychiatrist wanted to put me on Lithium for depression, and the gynecologist wanted to let my cycle work itself out. I was very desperate and feeling very hopeless.

**The Key**

Shortly afterwards, a friend gave me a book by Judith Bardwick, called *The Psychology of Women*. This has an excellent chapter on the menstrual cycle and the effects of the pill. The answer to the problem she gave was to try estrogen. Taking estrogen was like going into the light from a deep, dark tunnel. Unlike some other women with PMS, I have always found estrogen helpful – particularly in implant form.
Later, I was put back on the trail of Dr. Dalton by seeing her on television in the USA, ordering her latest books, and getting in touch with a group in Wisconsin who promote her work. Some time ago I was able to contact her personally, and I again tried progesterone, this time successfully.

I now take both estrogen and progesterone and find the combination has improved my life 95 percent. I still have mild PMS, but not the major problems I used to have. When I go off the hormones, my problems quickly return.

As I look back over my twelve years with PMS, I can remember that when I was at my very worst, in England, I was on a very healthy diet, using hardly any salt. I was running five miles a day, and getting plenty of rest. My life-style did not help one iota with this problem. Maybe in less serious cases, it might.

The point is that while rest, good diet, and exercise are important, they may not help this problem. If you have a similar problem to mine, or if you are married to or involved with someone who does, they need specific physiological help. There is help available, though it has been, to date, very hard to find. May I encourage you to pursue it and find life sweet again.

**SUMMARY**

Most physicians know little about PMS.

Hormonal help is the usual answer to the PMS problem.

There are now PMS centers scattered through the USA.
CHAPTER 37
Premenstrual Syndrome: What It Is and How To Cure It

If there is a regular emotional and physiological "down" at the end of each monthly cycle, you have PMS, but it need not take you down to apparent hell. It can either be cured or made endurable.

* * *

The cruelest part of the experience is to be told it is only a fantasy and not a reality. Actually, it is as real as cancer and from day-to-day it may be far more devastating.

* * *

DO YOU HAVE SOME OF THE FOLLOWING EMOTIONAL SYMPTOMS?

Do you scream at your kids? Do you even hit or batter them once a month?
Do you pick fights with your husband? Are you ready for a divorce cyclically?
Do you hate everybody? – become somewhat paranoid?
Do you kick the dog or anything handy periodically anytime on from ovulation?

* * *

A Monthly Complex of Pain

A brilliant young girl flunks an important exam; a woman with a fine husband and family suddenly feels she can’t go on, and tries to slash her wrists; an alcoholic goes on another of her cyclical binges; yet another woman is incapacitated with a migraine. These are some of the many crises which can occur to various sufferers from premenstrual syndrome (PMS).

PMS is a complex of symptoms occurring in women in the premenstrual phase of their cycle. It may last from a few days before menstruation in some women, to over half their days in others. In severe cases, women can begin to feel badly as early as ovulation, or a few days afterwards. Some feel better as soon as they menstruate, others a couple of days later. Still others do not feel absolutely well until their periods are over. But the key to diagnosing PMS is that these women have at least one week a month, every month, between the end of menstruation and ovulation (often more), when they are symptom-free.

Awesome Statistics and Awful Symptoms

It is estimated that in the U.S. alone, there are 24 million women with some degree of premenstrual discomfort.¹ Six million of them suffer seriously from PMS, impairing their marriages, family situations, work, and social life.² A high proportion of crime is performed when female criminals are in the paramenstruum (the last four days before the period, and the first four days of the period).³ Approximately 50 percent of suicides occur among women at this time.⁴

The symptoms of PMS may have a definite beginning each month when the patient feels a sudden definite change in the body, as though a switch has been thrown. The symptoms progressively get worse as the period draws nearer. She begins to feel less well. It may begin with lethargy, proceed to irritability, and then deteriorate into depression, which gets worse, then possibly improves before the menstrual flow.

However, it can linger at a milder level until the end of menstruation. The last half of the cycle (approximately 12-16 days after the last period began to the beginning of the next menstruation) may be punctuated with all sorts of emotional crises. The sufferer may suddenly explode into anger, or a tantrum, over what seems to the observer to be a trifle. This is especially likely if the patient has not eaten for a prolonged period of time, since blood sugar levels are more fragile at this time.

There may be long, protracted weeping bouts. The woman may become extremely sensitive over incidents which would not affect her at other times. Marriages may suffer and even shipwreck over this problem. Some sufferers will abuse husbands and children verbally, and even batter them physically. Often they say they couldn’t help it. Some women may not be able to control either their food or drink intake. Many crave sweet, salty, and starchy foods at this time. Others become extremely thirsty. Some women have alcoholic crises cyclically.

Erratic behavior is common. They may buy things which are inappropriate or too expensive. Some may shoplift. In extreme cases, women may commit crimes like arson and murder. Many women feel suicidal. Others may try. These may seem like extreme cases, but every woman who suffers with PMS recognizes the direction towards violence and anger in herself. And many fear the day when they may go out-of-control, without being able to help it.

Apart from the emotional symptoms, all sorts of physical symptoms can occur cyclically. Probably the worst are crippling migraines, asthmatic attacks, and seizures. One can understand the poor physician who scratches his head looking at a reasonably healthy looking specimen of womanhood, though apparently neurotic, who claims to ache all over and have what seems like dozens of symptoms. It is probably because the central nervous system is affected that the whole body comes out in sympathy.

PMS is a rather humiliating problem. You often make a fool of yourself by reacting inappropriately and irrationally. You don't get much sympathy because you are a bear to live with. You often do not have such apparently serious problems to evoke pity. Neither can you psyche yourself up to overcome the problem the next time. You are aware that you are not functioning properly, but you cannot control yourself. The guilt of being so irritable is almost unbearable. It lives with you all the time, even as a shadow when you feel well, knowing that it will come again and soon. It spoils at least half of your life, and sometimes the consequences ruin the whole of it. It destroys your sense of self-worth. You just manage to rise above it at the beginning of the cycle, and it descends on you again. And then there is the frustration of getting help.
Those who have suffered seriously with PMS have found it extremely difficult to get treatment. The wide spectrum of symptoms, both physical and emotional, often cause physicians to classify such women as neurotic. Tranquilizers and antidepressants, which often do not help this problem, may be prescribed. Some doctors are aware of the problem, but consider that there is no adequate cure. Others give diuretics, which work to flush out the excess fluid which builds up in the body at this time. However, excess fluid is a symptom, not a cause of PMS, and diuretics are often unsuccessful in treatment for depression.

**Dr. Katherina Dalton – Pioneer**

The two prominent hormones involved in menstruation are estrogen and progesterone. Dr. Katherina Dalton, a physician in the British Isles who has pioneered work with progesterone for over thirty years, believes that PMS is caused by an imbalance in the estrogen-progesterone balance. Those with a marked progesterone deficiency will suffer from severe PMS.\(^3\)

While Dr. Dalton recommends progesterone for serious cases of PMS, and believes that as a diabetic needs insulin, so a severe PMS sufferer needs progesterone, she does give alternative treatments for some. She recommends taking life easier at this time, having extra rest and spells of relaxation throughout the day. Patients are told to restrict fluids to one pint per day and to limit salt (beware of packaged foods which contain a lot of hidden salt). Caffeine should be avoided.

She warns that some symptoms result from hypoglycemia during the premenstruum and suggests that sufferers should not go too long without food. She recommends eating small meals every two hours.

Those who are on the contraceptive pill should realize that they are generally high in progestogens, synthetic hormones which are more like testosterone and sometimes estrogen in composition than progesterone. These lower the progesterone levels in the blood and, therefore, worsen the condition. Alternative methods of birth control should be sought. Generally progestogens are not helpful to PMS sufferers.

Diuretics are recommended for patients with mild premenstrual symptoms that are due to water retention, but they will not help the psychological symptoms. Slower acting ones are recommended, and those on them long-term should also take potassium.

Dr. Dalton also states that the use of tranquilizers and antidepressants is unlikely to ease the symptoms adequately. Amphetamines drugs may cause patients to become habituated, as they are especially prone to this in the premenstruum.

Lithium may be used with progesterone in those who have manic symptoms. However, it is not very helpful in PMS, and takes six to ten days to work each time, while blood levels have to be frequently monitored because the therapeutic level is close to the toxic level.

Bromocriptine has been recently advocated for the treatment of PMS. It has been most successful in those who have breast enlargement and generalized swelling, and some with a recent history of postpartum depression. Dr. Dalton feels that in tests it has not made a significant difference in the alleviation of premenstrual mood swings, swelling, or headaches.

Vitamin B6 or pyridoxine is helpful in a small proportion of women who develop premenstrual depression following the use of the oral contraceptive pill. Dr. Dalton does not feel it really helps women with severe PMS, and only about a third of those with minor symptoms.

Those who have severe PMS may only get relief from using progesterone. But before a doctor will prescribe progesterone therapy, he or she will insist that the patient fill out a chart for two or three menstrual cycles, recording symptoms in relationship to the period. If the chart furnishes the evidence that progesterone is indeed called for, it will probably be supplied in suppository form or in the form of a rectal syringe. It can also be given by injection, but since this is needed daily, it is usually inconvenient. (An oral form of progesterone has recently become available.)

Suppositories of 200 to 400 mg. are often used twice a day, though dosage varies among individuals and may need to be taken more often. The treatment begins each month two days before symptoms are expected and goes through to menstruation, though some may use it into menstruation if problems persist. In many cases estrogen therapy may also be helpful.

### What Can Husbands Do?

Men do not have the intricate hormonal mechanism that women do. Their levels are stable all through the month. Because of this, men find the changeableness of many women beyond their comprehension. They think of them as fickle, erratic, and irrational. The irritability and meanness hurts them, and they find it hard to understand. They feel that their spouses act as though they hate them, and at that point of time they probably do. One wonders how many less long-suffering men have given up trying to please an implacable wife, and how many women have been so deluded by their symptoms that they believe they cannot stand a perfectly good husband, and leave.

How can men help? By emotional support, even when it is not wanted, and remaining stable when their wives cannot. They have to understand that their women have a real physiological problem which affects them emotionally, and one which they cannot help. Men should try to resist getting embroiled in useless arguments, yet not appear to abandon their partners emotionally. Women in this condition are hard to live with, and impossible to please. They want affection, yet act in a way which prevents them from receiving it. They are ambivalent – acting in an approach-avoidance manner. Basically they need reassurance that, despite how bad they are, they are still loved. Pity the poor men – they are battling something they cannot win until it is past for another month – or cured!!

When women come out of this menstrual phase, they often forget what they were like while in it. They have a sudden change of emotion, and expect the husband to change just as quickly. Meanwhile the husband is probably still raw and hurting from the murderous verbal attacks of the previous days. The reason women forget may be varied. For instance, it may be just that the premenstrual mental state is one in which clumsiness, confusion, and forgetfulness are an inherent part. She truthfully may not remember all the details of what happened. On the other hand, she may not be able psychologically to face how bad she really was. Thus she subconsciously denies what happened.
Both husband and wife, and others involved with someone who has PMS, need to realize that while emotional problems must be treated with emotional cures, and spiritual problems with spiritual cures, the emotional, spiritual, and physical parts of our nature are closely intertwined. Physical problems must be physically cured, and no amount of psychotherapy will alleviate PMS (though it is a relief to understand the problem).

The depression and erratic behavior are just as much symptoms as the migraines and mouth ulcers. Premenstrual herpes is considered incurable at present, yet progesterone will alleviate the symptoms while you take it. While no one feels guilty about having mouth sores, the symptom of depression always brings guilt, though it is just as incurable without progesterone as is premenstrual herpes. You can no more wish away depression and lethargy than you can premenstrual herpes. Yet a sufferer is inevitably blamed for irritability and depression.

Such condemnation only discourages further a person who is already feeling very hopeless. Much better than condemnation is to do something to get the condition cured. The husband may have to find the energy to pursue the course of getting his wife treatment – she may not have any energy. But he will find it a most worthwhile pursuit.

Those who find relief from PMS almost feel that they have been born again. As more knowledge of the subject is perpetuated, we hope it will soon become a disease of the past, helping many sufferers to have fuller, richer lives than they could when this problem cast a shadow over their sunshine.

SUMMARY

PMS is a complex of symptoms occurring in the premenstrual phase of the woman’s cycle, affecting from 40-60 percent of women in varying degrees.

The emotional symptoms of irritability, inability, lethargy, and depression, are the hardest to bear.

Treating the imbalance of estrogen – progesterone often brings relief.

Tranquilizers, antidepressants, amphetamines, diuretics, etc., are not the answer. Nor should large amounts of B6 be taken.

Husbands, or other kin, may need to take the initiative in getting help for the sufferer.

REFERENCES

2. K. Dalton, Once a Month, p. xi.
4. Ibid., p. 4
5. K. Dalton, Once a Month, p. 135.
CHAPTER 38
The Many Faces of PMS

What all doctors once thought was psychological is now known to be physiological. Almost half of the female sex after puberty have emotional downs at the end of their cycle. In about 10 percent of women the downs is of such intensity as to make normal living impossible and threatens family and even life's stability. There is help available on several fronts, dietetic, exercise, and hormonal therapy. These can bring order out of chaos, success out of failure, and life out of threatened death.

* * * *

To bemoan the risks of endometrial cancer associated with therapy with estrogen alone is out-of-date. That Progestogen therapy markedly reduces and apparently even eliminates the risk of endometrial neoplasia associated with Estrogen use in menopausal women has now been well established by both British and American prospective studies.


* * * *

IN THE LAST HALF OF YOUR MENSTRUAL CYCLE, ARE YOUR BODY AND MIND OUT OF CONTROL? ARE YOU?

Irritable?
Out of Control?
Lethargic?
Depressed?

* * * *

Nearly Half of the World

Dear Gillian:

I feel so much better since being on progesterone! It is much more reassuring that I feel like a "normal" person instead of a paranoid, irritable, depressed, out-of-control person. I also get up in the morning with my family – instead of feeling guilty about the sixteen years I used to sleep until 9:00 a.m. I can be with more than one person without thinking they are talking about me.

I have been in the mental ward (once five years ago) and was told I would be there for seven years. In fact, I was so confused I signed myself in for seven years! Then, in 1983, I was in another mental facility for a 72-hour hold! Both times I have had thyroid tests and everything turned out O.K.

I have been on progesterone and thyroid for four and a half months ... If I ever was unable to get the medications for this problem I know I would turn into the paranoid person I have been for the past twenty-three years. I'm so pleased that the good Lord answered my prayers.

Sincerely, D. V.

There are many family and marriage counselors, crisis lines and alcohol treatment centers who never take into account the impact on the family of a woman with PMS. Neither do most ministers recognize this problem and its effect on the female portion of their congregations. While in the last two or three years there has been a surge of publicity in the USA about PMS, it is still often treated as a joke, another fad or "scapegoat" for willful misbehavior.

But since PMS is a problem for approximately 40-60 percent of the menstruating female population (a serious problem for 10 percent), since the congregations of our churches are composed mostly of women, since PMS has a tremendous effect on the spiritual life of a Christian woman, and since many of these women are married to men – the subject is worth consideration.

There are many reasons why the subject is often not taken seriously. Women who don't have the problem tend to be very unsympathetic with those who do, ("I have periods, and I'm all right!"); women who have it often deny it (a similar reflex to the way many alcoholics deny alcoholism); the liberated woman won't countenance it ("It will cause discrimination in the workmarket"); many psychiatrists don't believe in it ("There's no such thing as hormonal depression"). And, of course, some husbands scratch their heads ("It's that time of the month again") as they head for the nearest motel.

For Christians there is an added set of problems. For the woman who finds herself recurrently fearful, irritable, depressed and unreasonably angry for at least part of the cycle, there is a tremendous load of guilt. "I want to be a good Christian," said Annette. "I pray about it all the time, but it keeps coming back and I find myself so irritable with the children. They get a spanking at least once a month. Prayer doesn't seem to have helped."

Suzanne told me, "My PMS has been getting worse and worse over the years. It used to last only a couple of days. Now I have it for three weeks out of the month and it has ruined my marriage. For years I didn't know what was wrong and now, even though a cure is in sight, I wonder if I will ever get over the results of those terrible years."

In her book, The Psychology of Women, Judith Bardwick observed a very interesting experiment. A large group of women were interviewed more than once without being aware of the reason for the interviews. As part of the procedure, but not stressed, the date of menstruation, and the calculated time of ovulation were recorded. Then the conversations of these women before ovulation were contrasted with the conversations that occurred during the week prior to menstruation. The results were interesting. Just before ovulation, the women felt on top of the world. They were coping well and spoke with enthusiasm about happy memories and the good things that had happened in their past. But premenstrually, these women...
tended to be negative and sad. They recalled unpleasant memories such as accidents and would dwell on such details as the amount of blood and the pain. This was the general tendency of the entire group studied, as it had not been determined whether any in the group had PMS.

Most women have a tendency to change their attitude to some degree, depending on "the time of the month." In some women this is so slight as to be unnoticeable. Others may become irritable for a day or two before menstruation. But still others have a drastic change in personality. Bradwick theorized that this change occurs because estrogen peaks just prior to ovulation, giving a feeling of wellbeing. Others have postulated that a low level of the second female hormone, progesterone, produced at ovulation through the second half of the cycle, causes the low-mood level in women with PMS.

Who is affected? Probably 40 to 50 percent of women experience symptoms of PMS,¹ and probably 5 to 10 percent have severe, incapacitating or life-threatening symptoms. Many of the women who first complain of PMS are in their mid-thirties. But in some families, there is a history of PMS, and those women can begin having problems as early as one or two years before puberty — and it can last into their sixties, even well after menopause!

This means there is a large proportion of women whose self-esteem and the happiness of the people who live with them are affected by this "universal change of mind" between ovulation and the premenstrual week. Conversely, there are also many women who hardly notice these changes. PMS in its worst manifestations is a stranger to them, as alien as it is to a man. It is very difficult for women who have never suffered from severe PMS to understand the incapacitating nature of the symptoms some women endure.

What Is PMS?

To understand the problem better, we need to define it. Premenstrual syndrome is characterized by a clustering of symptoms in the last half of the menstrual cycle and an absence of symptoms at least after menstruation.² There is a range in how long the symptoms can last — some women have mild PMS a couple of days before their periods. In others, it can manifest itself for much longer — up to three weeks out of the month. The latter group have symptoms from ovulation (an average of fourteen days before the flow) until the end of menstruation. These women say to me, "I only have one good week a month."

Premenstrual Symptoms

Three common patterns of PMS symptoms have been isolated. These three occur in the second part of the cycle and are illustrated in Chart 1.
There is a plethora of possible symptoms, all of which could be symptoms of nonhormonal problems if they occur singly. But with PMS, there is a clustering of symptoms, and that clustering always occurs at the same time in the cycle. There is also a time when they "go away," and the woman is symptom-free. Thus the TIMING is more important than the TYPE of symptoms. Every woman has a slightly different pattern of symptoms, with different emphases, but there are also some common or predictable patterns.

The symptoms can be categorized as psychological or physiological. Most women fear the emotional more than the physical ones. Often they complain of the PMS triad – irritability, lethargy and depression. Each of these ranges in severity. Thus, the irritability can be mild, but in its severest form it may lead to violence (especially when linked with alcohol). I have counseled women who go through the house like a tornado smashing everything movable. I recall one who claimed to have picked up a small truck to throw at her husband, and another who blackened her son's eyes, and so on. Only last week in our support group a woman was telling the others how she had torn out fluorescent lights and thrown them across the room! While violence affects only a subgroup of PMS sufferers, it is not uncommon, and many women have a terrible problem controlling their inner violence. They are often verbally, if not physically, out-of-control.

Depression ranges from "the blues" lasting only a day or two a month, to a subgroup of women who experience recurrent suicidal feelings. Some women only feel like dying, but I have often interviewed women who have a history of suicidal attempts. However, premenstrual women also tend to be accident-prone and confused, and as a result, often "botch it" and fail in their purpose. One of my patients recently told me of a PMS lecture she had attended. A pathologist had come along out of curiosity because he had done numerous postmortems on female suicides who, on autopsy, were found to be premenstrual. He wondered if there was a connection. Consider Chart 2 which illustrates the rise and fall of the number of attempted suicides in correlation with their menstrual cycle.
Violence and suicide are two extremes which most PMS women will not experience, but the typical pattern of even mild to moderate PMS is still devastating. Apart from the usual triad of irritability, lethargy and depression, many women experience a type of paranoia in which they become supersensitive to people and situations. They blow incidents sky-high, out-of-proportion, making the family shrug their shoulders in bewilderment. They may feel they are going insane, as if they have a split personality. These sufferers often confess that they feel "out-of-control."

Very frequently women experience "feelings of flight," which means they want to run away and start something new. In some women this leads to changing jobs or spending sprees. In others, it has more severe repercussions – they want new horizons and seek to be out of their present relationship. Such women may threaten to leave, pack and unpack their things each cycle, or actually walk out, never to return.

Other women can become phobic and have anxiety attacks, often with hyperventilation. This can be very frightening since they may feel they are having a heart attack. Phobic symptoms are a convenient bridge to cross over from emotional to physical symptoms because the two often occur together. The panic often comes because the heart palpitations are so strong that these women may feel they are dying. Panic attacks, along with some other symptoms like migraines, may develop in PMS sufferers at times when they have not eaten for a long time. Hypoglycemia (low blood sugar) is an intimate relative of PMS – one almost presumes the other. Other near relatives, often found where PMS is found, are allergies and yeast problems (overgrowth of *candida albicans*).

There are many other physical symptoms possible, though many women have few or none of these. But some do have such symptoms as severe headaches or migraines, sometimes asthma attacks and more rarely, seizures. Since the hypothalamus and the central nervous system are involved in PMS, all systems of the body are possible targets for PMS. For instance, while some women may suffer from asthma, others may get tonsillitis or recurrent flu-like symptoms or hoarseness. The skin may be affected. Some women break out in acne, others in hives and occasionally even boils. Some women get recurrent herpes, either oral or genital. This form of herpes is not a venereal disease but an allergy reaction. These are only some of the possible symptoms of PMS. There are many others but, as we have said before, what characterizes PMS is that these symptoms come back each cycle and also disappear for part of the cycle.

One can sympathize with a physician when such women come into the office aching from the crown of their heads to their little toes. Often when they are thoroughly examined and tested, nothing shows up in the tests. Who can blame doctors for thinking these women are neurotic? Yet with a little information, it is very simple to diagnose PMS, especially if women will keep track of their symptoms on a calendar in relationship to the menstrual cycle.

But aside from the physicians, what about you? What will YOU do when you learn that a friend or family member has the symptoms of PMS? What will you tell her? Will you say that she needs to pray more, that if she had more faith she could be healed? When she tells you that she feels as though she is possessed by a demon, will you agree and seek someone to expel it? Will you heap coals of fire on her head, exacerbating the ever-present bleeding sore of guilt, by telling her she should be able to overcome this problem through prayer? Many Christians do this to people who are suffering from all sorts of sicknesses. How often have you heard someone say, "You have some sin in your life – if you dealt with it you'd be healed"? Little do these well-meaning counselors realize that they make a hard-to-bear burden intolerable. To a person suffering from PMS who may already be in a suicidal state of mind such advice may be the last straw.

The woman who wrote the letter at the beginning of this article is a case in question. What would you have said to her when she was locked up in a mental ward? Her Christianity survived her emotional problems, but advice alone would never have cured her. Neither would prayer alone, though it helped her survive and led her to help. The appropriate physical treatment has done for her what counseling and spiritual truths couldn't, since PMS is essentially a physical problem with resulting emotional and spiritual results. It needs a physical cure with kindly counseling to smooth down the hurricane effect of having PMS.

**SUMMARY**

1. While many doctors scoff at PMS, many women recognize the reality of it and benefit from treatment where available.
2. Many ministers and counselors do not take into account the almost limitless impact of PMS on the individual, the marriage, the family, and society.
3. According to Judith Bardwick, women universally experience a heightened mood before ovulation and a lowering before menstruation. PMS is an exaggeration of this tendency.
4. Since PMS is a physiological problem, with emotional and spiritual implications, it may not be resolved by prayer and counsel alone.

5. Christian women, particularly, suffer from guilt because they fall drastically short of their own ideals.

6. Forty to sixty percent of the female sex are affected to some degree by PMS. Ten to twenty percent have severe, sometimes life-threatening problems because of it.

7. PMS sufferers may experience some of 150 symptoms, both physical and emotional. The emotional are the most devastating.

8. PMS is characterized by a clustering of symptoms premenstrually (possibly from ovulation on). Menstruation usually lessens its severity but symptoms may continue well into the period.

9. It is characterized by at least one good week after menstruation and before ovulation. However, women do not always fit the classic PMS pattern.

10. Not all will have the same symptoms, though there are common ones – for example, the triad of irritability, lethargy, and depression.

REFERENCES


2. There are other hormonal problems besides premenstrual syndrome which may cause symptoms continually or longer than the usual patterns. These include postpartum depression, which may remain unresolved for years (but often it is resolved within a short time into PMS); estrogen deficiency, which particularly manifests itself at menopause but may affect women with PMS as well – especially women who have had a tubal ligation some years previously; low normal thyroid levels, which can cause constant fatigue and depression in women.

3. Taken from my brochure *Premenstrual Syndrome Therapy* and essentially borrowed with changes from Dr. Dalton's book *Once a Month and The Premenstrual Syndrome and Progesterone Therapy*.

4. Again, we are describing classic PMS and some women just do not fit the pattern. See footnote 2.

5. Joyce Landorf who has incurable TMJ (a jaw-joint dysfunction) with incredible daily fourth-degree pain received 150 letters a month telling her that if she had more faith she would be healed.
CHAPTER 39
Why Some Women Get Depressed

* * * *

Much depression in women is not a lack of faith, it is a lack of hormones.

* * * *

The ill-informed say, "It's all in your head." Actually, it is as physiological as juvenile diabetes, and survival depends just as surely on the administration of a hormone.

NEAR THE END OF THE PREMENSTRUUM, DO YOU?

Do you lose your will-power?
Do you feel suicidal?
Do you cry for no apparent reason?
Do you forget things easily and become clumsy?

* * * *

A Monthly Embarrassment

Two Irishmen were discussing a party which had been held the previous night. Says Finnegan to Murphy, "Is it true what they're saying about O'Brien?" Says Murphy, "Sure, a terrible disgrace to the Irish!"

Says Finnegan, "And Mallory? Was he wanting to fight everybody, is that the truth?"

"Ah," says Murphy, "Mallory was a crazy divil – worse than O'Brien."

"It's uncomplimentary reports I've been hearing about O'Burke's deportment," rejoined Finnegan.

"Oh," says Murphy, "O'Burke passed out cold long before midnight. It's an embarrassment he'll never live down."

"It's a terrible shame," says Finnegan – "a terrible shame it is. But tell me," he whispered confidentially, "was I there?"

The woman who has PMS is a bit like Finnegan. She can hardly believe she behaves the way she does premenstrually, when she reminisces postmenstrually. She's embarrassed about the past and afraid of the future.

I'm not sure how Pam got my number, but she came to my home with her alcohol counselor who was very interested in PMS. Pam cried all the way through the interview, so I had to take her history from the counselor. He told me he had only heard of PMS three weeks before. However, he had wondered for years whether there was a connection between menstruation and drinking habits in his female patients.

He had them "worked out" psychologically, and the only reason he could find why some women began drinking again was the trigger of the menstrual cycle. For the previous six years, so strong was his conviction that there was some connection with the menstrual cycle, he had asked his female patients to fill in a calendar and chart their symptoms.

Pam, he told me, was a reformed alcoholic and a drug-abuser. Her wild aberrant behavior began at puberty. She ran away from home and found work as an artist. She was an attractive girl, but experienced strong suicidal tendencies and had great difficulty controlling her alcoholism before menstruation.

I encouraged Pam to consult a physician, and he began a course of medication including the natural hormone progesterone. The treatment made her feel as if she had been "born again." Life took on a new meaning. Even though Pam had suffered from PMS from puberty and was now in her forties, she responded well to the medication. It radically changed her life.

Why do women like Pam suffer from PMS? While the experts are still a long way from unanimity, Dr. Katherina Dalton, the British expert on PMS, has found that women with PMS have lower levels of progesterone before menstruation.

This, of course, is a symptom, not a cause. Since several important glands are involved in the menstrual cycle, and since the sequence of triggering and inhibiting the production of hormones is very complex – much more so in women than in men – PMS is probably due to an interplay of causes.

The Role of Neurotransmitters in PMS

The most plausible theory to date involves research into the role of neurotransmitters, brain chemicals which vitally affect mood and also control hormone function. It is not necessarily true that hormonal fluctuation affects brain chemistry as a first cause. The thought is rather that imbalance in certain neurotransmitters (like norepinephrine, dopamine, phenylethylamine, serotonin and the beta-endorphins) causes abnormal hormone function. For example, women with PMS are known to have much lower levels of endorphins than women without. It is possible that poor diet over generations and in one's present personal life-style may contribute to this derangement of neurotransmitters.

High protein intake in most western societies is believed to be at least partly responsible for this problem. Medical journals are already making reports on this current research. Those interested may wish to read the work of Drs. Reid and Yen particularly.

Although no one can really be dogmatic about the causes, Dr. Dalton has treated tens of thousands of women in England and on the Continent with natural progesterone with considerable success. Taking a cue from Dr. Dalton, the physicians I have worked with have had a similar success rate among women with classic PMS. Women who do not fit the strict definition of PMS often respond less well than those who do fit it.
Dr. John Studd of London, working from the principle that ovulation triggers PMS in some women, has given tens of thousands of British women estrogen implants. This provides constant levels of estrogen which inhibit ovulation for four to twelve months, and many women who have found progesterone therapy of limited help, report great success with the estrogen implant. Estrogen tends to be a mood elevator in many women, though others find it makes them irritable and depressed. Since PMS can take place in women who do not ovulate and some who are postmenopausal, Dr. Studd's theory that ovulation triggers PMS may not be correct — but practically the implant does remarkably help many women.

Doctors in Australia, where progesterone therapy is unavailable, have also used estrogen implants with benefit for their severe PMS patients.

Hormones have had a bad press for years. Estrogen in particular has been questioned, as a woman on continual estrogen therapy for years who still has her uterus may develop endometrial cancer or precancerous changes in the uterus. The risk of this developing is un-done when women are given progesterone for only one week of the month. Continual estrogen therapy may cause menstrual bleeding to cease after a while with a consequent build-up of the lining of the uterus. Estrogen is contraindicated in women with a history of diabetes, high blood pressure, thromboembolism and hormonal cancer. Taking progesterone for a week a month will cause a shedding of this lining (a false period), and this apparently negates the risk of uterine cancer from using estrogen.

Side Effects of Progesterone
The side effects of progesterone are nowhere near as burdensome as the symptoms of PMS — particularly that of suicide! One main side effect of progesterone is a change in the length of the cycle (the cycle being the number of days from day one of one period to day one of the next). It can either be shortened or lengthened, and it usually settles back to normal within a few months. The other main side effect is spotting — it may be a problem for about 10 percent of women and is usually a temporary phenomenon. Some women feel hyperactive on progesterone, others feel drowsy (these are overdose symptoms). A few women may have an allergy to the soy base of progesterone. These may have a heightening of their symptoms, flushing of the skin, possible local irritation, hyperventilation or pounding heart. This is rare and some allergists can give antigens to these women, so they can take the hormone with no bad effects.

It does seem that progesterone therapy is very successful provided it is given at the right time in the cycle and in the right amount. Both of these factors are variable as some women have symptoms much longer than others, and they also vary in their absorption. (That means that some will need less or more than average doses.) Another important factor in giving progesterone is to make sure the right hormone is given. Progestogens, man-made substitutes for progesterone, may make the symptoms of PMS worse.5

In many women progestogens affect progesterone production by their effect on the pituitary and do not function properly as replacements for progesterone. This is why 85 percent of women with PMS have side effects on the pill, and why the pill is a major trigger of PMS and probably one reason why PMS is pandemic.

Other Common Triggers of PMS
There are other common triggers of PMS — tubal sterilization,6 pregnancy,7 not ovulating (amenorrhea), hysterectomy, and other hormonal factors. Stress, increase in age, poor diet, and lack of exercise are others. Where a woman has a family history of PMS, puberty is often the trigger, but PMS does tend to get worse as the woman gets older and may become unbearable if the woman goes on the pill or has a tubal ligation, or some other hormonal stress.

We need to stress that not every woman who goes on the pill or has a pregnancy, a hysterectomy or a tubal ligation will experience problems. But in each group there is a subgroup who experience adverse effects and these may worsen a preexisting PMS condition. Women who already have PMS should carefully consider the chance of adding a catalyst to their PMS. Neither should women think that having a hysterectomy is a blanket cure for PMS. PMS is probably more dependent on brain chemistry than ovaries and/or uterus, which is why it may continue or worsen after menopause or hysterectomy. Some women who have terrible cramps or very heavy bleeding may benefit from a hysterectomy, and some who have PMS may be lucky. But the likelihood is that while the pain and the bleeding should be cured, the PMS may not be, and in fact, may get worse.

What Can Be Done About the Problem?
If a woman feels she has PMS, what can she do about it? First of all, she should carefully record the dates of her period and chart her symptoms since most physicians will not treat without this evidence. Then she should adjust her life-style—her diet, exercise, and rest program. She should seek where possible to sunbathe regularly, since sunlight through the eyes affects the pituitary, and regulates menstruation, and it also works on the skin. She should avoid eating junk foods and eat a wholesome, nutritious diet, eliminating high levels of animal products and such items as excess salt, and excess intake of fluid. She should also exclude caffeine, alcohol, and nicotine, not to mention chocolate which contains theobromine.

Refined foods such as white flour, and white rice, should be avoided. Dangerous, too, is the excessive use of highly processed oils and sugars, for they destroy B vitamins which are essential for metabolism of the hormones. Caffeine, alcohol, and nicotine also destroy these vitamins. These drugs have a deleterious effect on the blood sugar level. They initially cause the blood sugar to rise, but then drop it, causing functional hypoglycemia (low blood sugar) which is often partly responsible for the erratic behavior of women with PMS.

Because of the coincidence of PMS and hypoglycemia, frequent eating is recommended — smaller meals, 3-4 hours apart. Women who do not change their diet or attend to the blood sugar problem will have frequent treatment failures even on progesterone — thus dietary changes are not an either/or but a necessary part of the treatment regime.

Certain vitamin and mineral supplements will help the majority of women with mild to moderate symptoms, making hormonal treatment unnecessary for them. B vitamins, as a complex, are very helpful, B6 in particular. But it is not wise to take B6 in large amounts on its own as it causes an imbalance of the other B's. No more than 200 mg. of B6 should be taken without the
supervision of a physician or nutritionist. Many B vitamins are made from a yeast derivative. Women with PMS must be careful that they are not allergic to yeast, since many women with PMS also have high amounts of Candida Albicans in their system. Taking yeast or B vitamins derived from yeast may only add to the symptoms. B vitamins can be found without a yeast base. Dr. Michael Lesser also advises women to take magnesium (2,000 mg. of chelated magnesium, equivalent to 400 mg. elemental magnesium) and 80 mg. of zinc per day. Some women who have bloating, sore breasts, and acne (and lactating breasts well past weaning) may benefit from taking Primrose Oil. But, just as some diabetics can control their disease with diet, and others, more severe, need insulin – so it is with PMS. Many women can handle PMS by making some changes in their life-style. But where there is a protracted severe problem, or a family history or where there has been severe hormonal trauma, hormonal treatment will probably be necessary.

The Practical Impact of PMS Information

Recently, my husband did one of his daily programs on PMS. Here is the essence of one letter he received:

I listened to your program today and it interested me very much ... You see, as you spoke, I saw my trouble. I've bitten my husband's head off for really no reason. They felt I might have a demon in me instead of understanding me.

I have had a hysterectomy in 1976 and I've been off the hormones quite some time. It seems like when things don't go right, I get flushed and then "all hell breaks loose." At moments like these my temper is very harmful to my husband and myself.

She goes on later to relate an incident that describes the predicament of the PMS family admirably. Her husband has a job a long way from home and seems happier without her presence.

When I was down there recently, I got frustrated or jealous because he had gotten a coat and it needed buttons on it. So he paid another woman to sew them on and paid her for it. That made me angry. I'm the wife and that's my duty and I sew for him at no charge.

Here is a typical situation of a woman with hormonal problems. An artificial menopause was the problem in this case. The woman is often "out-of-control." She seems to suspect that she is thinking wrongly, but her judgment fluctuates so that often she feels she is right. A minor incident like the buttons on the coat might annoy you and me, but for her it assumes immense proportions. Her husband, on the other hand, is bewildered and wants to stay away.

At first glance, you might feel like condemning this woman for being so irritable and for blowing things out-of-proportion. But, in fact, her symptoms are quite typical of a woman with a hormonal imbalance. Both she and her husband are to be pitied for a hard situation which is not their fault. They need sympathy and practical help for both of them are in an unenviable position.

The good news for women like this and their families is that help is more and more available than it was even two or three years ago. For some women, even if they have had increasingly worsening symptoms since puberty, and have endured such problems for many years, their lives can drastically change for the better, thus lightening the burden on their families. Then many of them, who because of their inner mental turmoil have lived in sheer misery, will be able to thank God at last.

In all ages, after shameful vacillation, Christians have risen to protest evils which enshackled souls for whom Christ died. Is it not time for all Christians everywhere to become intelligent about the hormonal problems which bind millions of families in emotional bondage and despair?

SUMMARY

1. The causes of PMS as yet are only hinted at, but modern researchers believe that a disruption of the neurotransmitters in the brain chemistry affects normal hormonal function and produces PMS.
2. Many women in Europe and the United States with PMS or postpartum depression, have benefited greatly from natural progesterone therapy, as propounded by Dr. Katherina Dalton. Side effects are believed to be mild.
3. Others with PMS in the U.K. and Australia have benefited from the use of estrogen implants to inhibit ovulation.
4. While estrogen has had bad press, it does not cause endometrial cancer when progesterone is regularly and correctly taken.
5. Progestogens, man-made progesterones, may actually trigger PMS and should not be used for treating PMS.
6. Low thyroid has been seen as either a cause or a coexistent condition with PMS in a proportion of PMS women.
7. Candida and allergies are often present in women with PMS and may need separate treatment.
8. Puberty, the pill, pregnancy, tubal ligation, nonovulation, menopause, and hysterectomy are some of the triggers of PMS.
9. Many women can eradicate their symptoms by life-style changes – diet, sunlight, and exercise in particular.
10. Other women need hormonal therapy as a juvenile diabetic needs insulin. Life-style changes are important for all cases, however.

REFERENCES

1. In an American survey 67% of menstruating female alcoholics related their drinking bouts to their menstrual cycle and 100% indicated that drinking had begun or increased in the premenstruum. K. Dalton, PMS & Progesterone Therapy, Ed. 1, p. 36, quoting Beyer ML & Carroll M (197) Arch. Gen. Psychiatrist, 25, 540.
2. While some researchers and physicians insist there is no clinical evidence that progesterone works, tens of thousands of women like Diana and Pam would disagree. Researchers in the past have usually not screened patients carefully enough to ensure they fit into the classic definition of PMS and often the doses they have used have been too low. (Only approximately 10 percent of the progesterone is absorbed from a progesterone suppository so doses appear relatively high.)

3. Dalton, K., *Premenstrual Syndrome and Progesterone Therapy*, p. 101, quotes research by Backstrom and Cartenson, 1974, and Munday, 1977. Dr. Dalton says on the next page that the theory of low progesterone levels in PMS women is not the full answer, since it is higher than in women who do not ovulate, and who don't necessarily have PMS.

4. Women who have hormonal problems do not always fit the classic definition of PMS. They may have symptoms all or most of the time. We mentioned that some women who have postpartum depression do not fully recover from it for years – it remains unresolved and those women will have continual symptoms of depression which will not respond necessarily to antidepressants (most antidepressants and tranquilizers do not cure hormonal depression and anxiety but rather make it worse). These women according to Dr. Dalton in her book *Depression After Childbirth* may need both progesterone and a particular antidepressant (see page 118-119 of that book).

Estrogen deficiency is usually a problem in some women at menopause or premenopausally (i.e., late thirties, early forties and later). The classic symptoms of estrogen deficiency are hot flashes, night sweats, drying up of the vagina, fleeting pains in the hands and feet (possibly osteoporosis or osteoarthritis) dizziness, vertigo, anxiety, depression, lethargy, nervousness. These symptoms tend to be continual rather than recurrent.

Dr. Norman Beals of Santa Ana, California, believes women can lack estrogen to some degree and yet menstruate, and that some young women go through what he calls a teenopause. He looks on PMS as a half-menopause where progesterone is running out faster than estrogen and that a proportion of women need both hormones. Especially where women with PMS-like symptoms have symptoms earlier than ovulation (i.e., the eighth-twelfth day), he feels this is because estrogen is not rising as it should. Such women should not be discouraged if progesterone is not the full answer for them.

Another factor in hormonal problems may be a low-normal functioning thyroid. According to Dr. Beals, this may not always show up in blood work – he rather depends on the Barnes basal-temperature test. On the second or third day of the period women should take their temperature under their armpit at 8:00 p.m. when the thyroid is at its maximum. Women whose temperatures are in the 96-97.5 degrees F range may be low-normal thyroid and may benefit from a low dose of thyroid medication. These women tend to feel the cold more than others, find it hard to wake up in the morning, feel worse in the afternoon and best at night, their skin and hair may be dry, they may find it hard to lose weight and have heart palpitations. Symptoms can be opposite (i.e., some are very thin, others find it hard to lose weight – some have rapid heartbeat, others slow). Some women may experience a mixture of symptoms and need treatment with more than one hormone.

5. The *Physician's Desk Reference* which lists drug companies and their products classifies progesterone and progestogens as essentially the same substance. Thus, for instance, the progesterone portion of the pill actually contains a progestogen. (There are many different progestogens available on the market today.) Progestogens can be swallowed. Progesterone cannot – it is destroyed by the liver before entry into the bloodstream. This in itself indicates a chemical difference between the two. (Since the writing of this article, an oral form of progesterone has been developed.)

Progestogens do mimic the action of progesterone in stimulating the lining of the uterus and, on withdrawal, cause the lining to slough off causing menstrual bleeding. Because of this, progestogens can legally be labeled as progestosterone.

Medroxyprogesterone can be labeled progesterone. It is a progestogen. Progestogens can do two things in a woman's body that may cause problems.

First, they can depress the pituitary gland from producing its own progesterone. They are enough like the real thing to convince the pituitary to stop producing its own progesterone. The same thing happens when people take a certain level of thyroid. The pituitary shuts down and depends on the outside source. This also happens with the pill, and sometimes the pituitary may not function properly for some time afterwards – even permanently. So, some women develop PMS after stopping the pill. Others may be infertile for a while until the pituitary kicks back into gear. A few are permanently affected by taking the pill.

Second, progestogens replace progesterone in some functions, but do not work in the progesterone receptors throughout the body and in the brain. Progestogens are like keys that fit the receptor but do not turn it. These receptors have to do with transporting a molecule of progesterone from one portion of a cell to another. Apparently, though this seems like a small operation, if it doesn't work it causes a lot of trouble! To quote Dr. Katherina Dalton:

> With advancing knowledge more is being learned about the way in which hormones are used in the body. Within many of the body cells are progesterone receptors whose task is to transport a single molecule of free progesterone from the fluid between the cells through the cell wall and the nuclear wall to the center of the nucleus where it is converted to use and later passes out of the body as pregnanediol. These progesterone receptors are in all parts of the body, but their concentrations are particularly in the brain, the eye, the nasal pharyngeal passages, the lungs, breasts, uterus and liver. It is the large concentrations in the liver which make oral progestogens ineffective for premenstrual syndrome ... These progesterone receptors are very precise, they are created for progesterone and will accept only that, rejecting substitutes like the synthetic progestogens ... and all the contraceptive pills."

> Once a Month p. 180.

6. Many women seem to have a lot of hormonal problems after sterilization. Statistics vary but the theory is consistent. Neils Lauersen quotes 15 percent of women as having problems after a tubal ligation, but Dr. Normal Beals says that about 60 percent of women will have problems within six to seven years after the surgery.

It is believed that the surgery inhibits some of the blood flow to the ovaries. Note Lauersen's statement:
Most likely PTLS is caused by hormonal imbalance. If a physician cauterizes, removes, or damages too large a proportion of the fallopian tubes and their blood vessels, he will reduce blood flow, the ovaries might shrink, and women may bleed less during menstruation. A hormonal imbalance might result in abnormal ovulations with irregular menstrual bleeding. When ovulation is off, there can be decreased progesterone production which brings on premenstrual syndrome with its excessive mood swings and depressions.

Researchers who have started to study the aftereffects of tubal sterilization have named the postoperative condition post-tubal ligation syndrome (PTLS). Women who experience this syndrome after surgery may have pelvic pain, irregular menstrual bleeding, severe premenstrual syndrome (PMS), and galactorrhea, a milky discharge from the nipples. Sometimes women are so incapacitated by the pain of PTLS that they undergo further surgery. Women have had D & Cs, additional laparoscopies, removal of their ovaries and even hysterectomies to rid themselves of this syndrome. Tubal ligation should not be considered minor, inconsequential surgery...

Neils Lauersen, Listen to Your Body, p. 354.

7. There are predictable patterns of pregnancy that often trigger postpartum depression. At the two extremes are the women who have a glorious pregnancy, who say "I wish I was always pregnant," because they do not experience at that time the ups and downs of PMS; and the others who tend to put on a great deal of weight and often feel nauseated throughout the pregnancy. Concern may be expressed by their physician that they are on the border of toxemia.

In both cases, depression may occur sometime after the delivery. It can be almost immediate or it can be "delayed." Probably 50 percent of women have "the baby blues" for a couple of days to a few weeks. But others with postpartum depression descend into deep, severe depression, even psychosis. Some of these women have no depression until they resume menstruation or wean the baby from breast-feeding. These may have a block of consistent depression for some months, and then with time it may resolve into PMS with the first part of the menstrual cycle being improved. A proportion of these women have unresolved postpartum depression for many years with symptoms all the time, but worse premenstrually. Such women may need help with an antidepressant as well as hormonal therapy.

8. Candida Albicans is a friendly yeast organism found in 98 percent of the population, both men and women. It can overgrow and become a problem when a person has a history of taking a lot of antibiotics or tetracyclines for infections or acne (these promote yeast). Diet is also a major factor. Hormonal problems can also change the flora of the vagina and intestine and promote yeast. Thus a lot of women may have a yeast problem with their PMS. They should obtain and read The Yeast Connection, by Dr. William Crook, if they feel they might have this. Treating PMS will not necessarily automatically fix a yeast problem and the symptoms are similar, and connected.

9. Dr. David Horrobin has done a lot of research on Primrose Oil. It contains an essential fatty acid which inhibits prolactin. Prolactin is the pituitary hormone produced in pregnancy which causes milk production. It is also present in the menstrual cycle since the breasts undergo changes each month, in case pregnancy occurs. One theory of PMS is that these women have excess prolactin (one of its functions is to inhibit progesterone in the feedback system to the brain). Not everybody agrees with the theory – it is probably one cause. Linseed oil is supposed to contain the same fatty acid, and it is a lot cheaper.

10. Which hormone depends on the problem. Progesterone is used for classic PMS. Other therapy is briefly discussed in reference 2.

Books
K. Dalton, Once a Month, published by Hunter House, revised 1983.
K. Dalton, Depression After Childbirth, published by Oxford University Press.
CHAPTER 40
A Husband’s View of PMS

Unless a man comes to realize that his wife’s cyclical instability is none of her own choosing and calls for his sympathy and patience, his marriage will collapse.

* * *

The poor man married to be spoiled and suddenly finds he needs more manly courage and patience than he actually has. What an opportunity to live by the Golden Rule! But unless he knows the gospel, that rule will mock both him and her.

* * *

The Self-Pitying Man!

For many women the most traumatic experience of life is the premenstrual syndrome. Other women may have no symptoms at all and find menstruation a breeze. For many men the most bewildering and frustrating part of their existence is their marriage or relationship with a PMS sufferer. The woman undoubtedly suffers the most, but because the man is usually the least patient and accustomed to speedy resolution of whatever problems threaten him, PMS can also result for him in depression and extravagant outbursts. It can threaten his chosen vocation, his family and friends, his own life and health, and most commonly his marriage.

PMS is a disease which usually strikes women cyclically before their periods every month. It can also happen in the absence of menstruation when the woman has amenorrhea, has had a hysterectomy, or at menopause. Some women are afflicted with a wide range of physical symptoms, even asthmatic attacks, epileptic seizures, and migraines, to name some serious ones. But all patients say that the emotional symptoms are by far the most traumatic. What they generally fear most are surging and overwhelming rage, the panicky feelings of being out-of-control, the fear of self-destruction, and the frightening impulse to destroy others – in short, the feeling that they are about to go over the edge into oblivion.

Most men, prior to marriage, idealize the woman they love. Her virtues are haloed and her more negative qualities are either not seen or minimized. Her chief asset is that she loves and tolerates him. PMS may begin at some hormonal crisis in life, for instance, the taking of the pill; or the ceasing of it; after pregnancy with postpartum depression; or after ceasing to nurse; after a tubal ligation; or a hysterectomy. It may just worsen with age, having been present in seed form since puberty. When it strikes the woman with full force, it also devastates the poor husband. He is aggrieved and feels cheated. He begins to think his wife has deceived him. Was she not all sweetness and light during courtship? Who is this intruder who looks like the woman he took to the altar or into his bed, but who is now acting like a harpy from hell?

Men expect their wives to deal with them as a good mother does with her child – compassionately, patiently, unselfishly. The poor woman is expected to embody all the virtues of every woman her husband has ever known. He is casual about his own defects but put out of sorts by unexpected imperfections revealed by his partner. He had hoped to be “spoiled” by his wife, and the thought of having to humor her indispositions had never been anticipated.

Husbands need to understand that the wife cannot help her behavior. She is as powerless to swing her paranoia and irrationality as the wave is to change the tide. But the situation is far from hopeless. Safe hormonal help is available and usually the problem can be easily dealt with.

What Every Husband Must Know

Meanwhile, the husband needs to understand the behavior of the past, and he needs to know how to support his wife emotionally in the present and in the months to come. There are some facts which will make the path easier for both of them, and which will give the husband understanding that to a large extent will heal his grief.

Many women with PMS are riddled with guilt. They are aware they are behaving wrongly, but cannot help it. Afterwards, they have to live with the results of the unhappiness they have incurred. They also have low feelings of self-esteem. Husbands should be careful not to increase the guilt feelings by useless accusations and admonitions which are impossible to be kept while the woman has PMS. Neither should he nor the family make her the scapegoat for all their faults since her faults appear the most grievous.

When a woman is actually cured, guilt often remains and has to be worked through. Residual tensions from the years of PMS, broken relationships caused by it, unresolved problems masked by it-all these have now to be dealt with. Both wife and husband need to be aware of this fact. Progesterone treatment makes a woman normal, not superhuman. If there are serious marital problems, aside from those caused by PMS, both should seek counseling from a qualified marriage counselor.

While in this time of the cycle when reality becomes distorted, the PMS sufferer will make all sorts of wrong judgments. While she may see elements of truth in her perceptions of the faults of her spouse, the issues she raises are often exaggerated way out-of-proportion. If she has not made the menstrual connection, and even if she has, she may blame her symptoms on the thing nearest at hand – her relationship. She may see her anger and dissatisfaction as due to a faulty marriage and want to get out of it.

Every month the husband may be subjected to the insecurity of wondering if his wife is going to walk out. She may actually do it, and even divorce him. Nobody would blame the husband if he wished her gone. He may not feel he can take any more. However, he should consider whether they really still love each other, and if apart from this problem they have a workable relationship. The husband should not allow himself to believe that the wife really wants this until she has had progesterone treatment and can make such a decision rationally.
Many PMS sufferers want to get out of a relationship because they feel they could cope on their own, but they cannot function within a close partnership because of the friction. Their desire to leave is often based on that, and like the desire to suicide, is a form of escape from a situation they cannot handle. The husband needs to understand it and not get upset any more than he can help. Another thing to keep in mind is that PMS sufferers may experience a great surge of sexual desire prior to their period which may even make them promiscuous and unfaithful.

In the light of such serious symptoms, it is obvious that men cannot help getting upset with their wives' behavior. It is unreasonable for a woman to think a man should just smile it off because he knows intellectually what the problem is. But, if he wants to stay married and redeem the situation, all he can do is to tell himself that she is irrational at that point, and that getting embroiled in pointless arguments will only aggravate and worsen the situation.

Empathy – Not Criticism – Is the Great Need

Let the husband get across that he knows his wife has a problem for which she is not responsible and for which he does not blame her. Let him do all he can to encourage hope.

- Know, then, whatever cheerful and serene
- Supports the mind, supports the body too.
- Hence the most vital movement mortals feel
- Is hope – the balm and life-blood of the Soul.

That person who has a strong confidence in the overrulings of Providence is miles ahead of all others in such a situation as this. The continual strain of fear that there will be outbursts when nonfamily people are visiting, or even worse when the couple concerned are forced into visiting or staying with others, the impossibility of projecting family socializing beyond the home, the possibility of nonrational actions by the wife when driving or spending or in a hundred other areas – all are too much to bear unless there is faith in a sovereign Power over the universe who continually declares, "Thus far, and no further." The Good Book has many promises that can light up the dark night of those in fear. "There has no trial taken you but such as is common to man, and God is faithful who will not suffer you to be tried above that ye are able, but will with the trial make a way of escape that ye may be able to bear it" (1 Cor 10:13), "Casting all your care upon Him, for He careth for you" (1 Pe 5:7), See also Romans 8:28-30.

It cannot be stressed too much that for the man the battle is in his own mind. He can choose to be aggrieved and feel hard-done-by, or he can wake up and realize that he has no claims on the universe and no right to an untroubled path. So long as he is engaging in orgies of self-pity, there can be no strength to meet the problem. The old-fashioned counsel of "counting one's blessings" is most appropriate for such a man. And the first thing he can give thanks for is in harmony with the old Jewish prayer, "I thank God I was not born a woman." After all, the odds were fifty-fifty. He could have been saddled with his wife's complaint, and what would he then have hoped for from the other partner?

Another ingredient in the male sufferer's philosophy also springs from the Sermon on the Mount. "Be not anxious about tomorrow but let the morrow be anxious for itself. Let the day's own trouble be sufficient for the day" (Mt 6:34). Some readers may remember Dale Carnegie's excellent volume. How to Stop Worrying and Start Living. It is worth reading and rereading and abounds in good Christian psychology about living in day-light compartments. "Anyone can carry his burden, however heavy, for one day." And that is all any of us is asked to do. "Be the day weary, or the day long, at length it ringeth to evensong." "Yard by yard, life is hard. Inch by inch, it's a cinch."

Surprisingly, the battle does not get easier. The same conflicts in one's mind must be continually resolved afresh. But it is not in vain. The very experience of uncertainty and frustration builds a steel into character that gentler treatment from life could not accomplish. Remember that nightmares never last, and only those resolved to endure the darkness can greet the dawn.

For the husband whose wife suffers from PMS, the battle will always be to think and decide rationally rather than emotionally. Many men are more logical by nature and will often try to reason out what is the exact but very abstract problem his wife feels so intensely about. He needs to be aware that even if he locates it finally, some side issue may raise its head during the discussion and cause another flare-up. Even patient husbands will come to the end of their tether very quickly, and either join in the fight or withdraw.

The certain knowledge that a wife is chemically affected and not responsible for her words and actions, does little to ameliorate the emotional hurt most husbands experience. The fact that a snake has no moral responsibilities does not lessen our hatred for it if it bites us. Often we have even kicked lifeless objects which have caused us pain. But while a husband cannot help how he initially feels, he can control his actions. In Charles Lamb's Essays, we often read of Bridget. Not all know that Bridget had fits of insanity recurrently. At such times Charles would lead his sister to the asylum. She was put in a straitjacket, or the equivalent at that time, until the fit passed and she could go home again. PMS is somewhat similar. Many women who emerge from the "down" swing of their cycle feel they have passed from a mild case of insanity to sanity. This reality the husband needs to recognize.

The Man's Greatest Mistake

What is the almost universal error made by spouses of wives with PMS? Undoubtedly, it is the effort to reason with their spouses. Sadly, it often takes years before the realization dawns that such an approach just will not, cannot, work. To think rationally is the one thing that the woman can do least at such a time. Happy the husband who awakes to this reality early. Happy, but rare.

What can then be advocated as regards the masculine strategy? Patience, patience, patience. Restraint, restraint, restraint. Pass every word through a mental sieve before uttering it, and don't be discouraged if even then a temporarily ill woman so twists it as to find cause for an emotional outburst.

The final word must emphasize the practical resolution of estrogen-progesterone therapy. It is axiomatic that things spiritually caused can be spiritually helped, but things physiologically or chemically caused must be physiologically or chemically
resolved. Don't get your wires mixed. Prayer is no substitute for estrogen or progesterone. Take your wife to a PMS counselor familiar with the work of Dr. K. Dalton, and your sun will speedily rise, because the heavy clouds enshrouding the one you love most will be dissipated. Together you will greet the rainbow of promise and declare the trauma was worth it, for you are now no longer emotional children but able to share in lifting the burdens of a troubled world.

– Desmond Ford

SUMMARY

There is no school for character development as tough as PMS. Only the one who believes in the sovereign love of God can patiently endure the wounds of a PMS relationship.

Instead of thinking he has the right to be coddled, let the husband act the man – especially the Christian man – and let his wife know that he understands she is not to blame for how she thinks and acts.

Patience, faith, and love – nothing works like these except estrogen and progesterone.
CHAPTER 41

Getting Rid of Guilt

Women feel more guilty about their PMS behavior than about anything else they do. Only the gospel can save them from despair. We have a God who understands and who forgives. He is as infinite in mercy as in wisdom and power.

"This man receiveth sinners," "He has gone to be guest with one that is a sinner" (Lk 15:2; 19:7) is still true at the end of each month.

* * *

The Pain of the Heart

Once a month Denise ends up hitting her small boy in sheer frustration. It's her fault he's so naughty because she has been so irritable with him for days. Most of the month, she has no problems with him at all. But, suddenly, she can take it no longer and smacks him hard. A few days later, when she sees the bruise, she is filled with remorse.

Mary's parents are afraid she will kill herself in the premenstruum. She withdraws for hours and days at a time, lying on her bed in apparent exhaustion. Nobody can speak to her, since when they try they often say the wrong thing and she explodes into temper tantrums. As the days go on in each cycle, she gets more and more depressed. Since the time her mother came into the bedroom one day unannounced, and found her holding a bottle of sleeping tablets, the family has hidden anything she could use to kill herself at that time.

Alice comes home from work and bursts into tears. "I just can't cope with the work—it's too much for me." Her husband knows she can usually cope with just about anything. "Oh, oh," he says, "it's the end of the month." But Alice thinks about it the rest of the time. "I hate being like that," she says. "I seem to grouch and shout at everybody over nothing for about half the month. Usually I love to play with the kids, but at that time, I can't stand anyone to touch me. They find it so hard to understand."

Many women live with a lot of guilt because of PMS. Husbands often think they are just being difficult, that if they would just make up their minds, they could behave differently. Even other women whose periods are relatively symptom-free have difficulty in understanding those who have PMS. Physicians often do not help. They treat many women with this problem as though they are neurotic, and may say it is part of being a woman, and that it has to be accepted.

The result is that much of the bad behavior connected with PMS continues to cause havoc in the home and in society. Marriages may be torn to shreds by the explosive outbursts and paranoia caused by PMS. Women may be convinced that they hate the man they married and walk out. Men may be convinced that this isn't the woman they married, and do likewise. Children may suffer from the yo-yo like behavior of the mother—sometimes loving, reasonable, kind—other times, vicious, irritable, withdrawn. Work relationships may suffer through misunderstandings caused because of wrong thinking and poor judgment in the premenstruum. And so on it goes.

The Guilty Need Acceptance—Not Condemnation

While we have looked elsewhere at the symptoms and cure of PMS, we should also look at the need for emotional and spiritual reassurance. Women who suffer regularly from serious PMS, can easily end up with little self-worth, a lot of guilt, and a hopeless outlook. This on top of the problem in the last half of the cycle can ruin the rest of life as well. Even when a woman and her family make the menstrual connection and realize that this is something that happens to the patient cyclically—and that it is something she cannot control—there is still the feeling of blame that has to be handled. Guilt registers in the brain, whether the behavior is purposeful or not. The mind does not filter guilt into true and false guilt, unless an intellectual distinction is made, and this has to be constantly remade, since the mind continually forgets.

It is difficult for all conscientious women to forgive themselves, or to think well of themselves, when they have PMS. Maybe they upset somebody, or hit them in anger, or bought something expensive when their judgment was impaired, or made a serious blunder at work, or dropped an expensive ornament and broke it. Maybe they did all of them and more than once! Even though they may rationalize it outwardly, underneath they hate themselves for it. And inevitably the feelings of blame that have to be handled—guilt registers in the brain—eventuated? Do their children hate them? Have they messed up important social relationships? Have they committed some unwise or criminal act? How can a woman get over the mistakes she has made because of PMS?

Guilt may even prevent a sufferer from seeking help. PMS is embarrassing. Talking about menstruation is difficult for many women, and added to this is the mortification over some of their bizarre emotional reactions. How do you tell a physician that she is often paranoid and irrational, she should deny her feelings and do all she can to get well. In this instance, a cure is available, but only to those who are prepared to admit they have a need.

Not Feelings but Facts Must Be Given the Wheel

In handling PMS, as in many other situations in life, it is our feelings that destroy us. The emotions of women in the paramenstruum may be completely distorted, yet often they are duped into believing that they are real. The way to deal with them is not to concentrate on feelings, for they are often impossible to change, and may keep coming back to haunt us. The facts are much more important, and even here one must take caution. Don't constantly dwell on all the wrong things you have
done, for while they are facts, their memories will not help you succeed. You must try even harder to choose the facts you
dwell on.

Keep reaffirming the fact, for instance, that PMS is a physiological disease which affects the mind. This is not easy, since PMS
sufferers invariably know they are doing wrong even while they are doing it, but they are powerless to control themselves.
Therefore, the sufferer is not responsible for what she does, though the results still occur and have to be lived with. But if one
cannot help the problem, one must learn to forgive oneself for the results.

The greatest fact to dwell on is the unconditional love of God. Humanity is not consistent. Your husband and family may reach
their limit of patience and let you down. Your doctor may inadvertently make you feel like a hypochondriac. You may get little
or no emotional support from anybody, and feel lonely, fearful, and miserable. But above all this, there is God, who never
changes, and consistently loves us despite our mistakes and shortcomings.

Many people think that God is out to get them, and that if they don't measure up, he will hit them with a big stick. But the Bible
says, "We need have no fear of someone who loves us perfectly; his perfect love for us eliminates all dread of what he might
do to us" (1 Jn 4:18 LB). God is for us, and not against us. He understands our sorrows, our heartaches, our broken promises,
and our guilt. And he forgives us because he loves us.

Women who have PMS are like many other people with physiological problems which cause erratic behavior. They may be
more aware that they are guilty than others who are more emotionally stable. But in actual fact, the Bible does not picture
people in various stages of guilt. It puts everybody on one level, and it divides humanity into those who know they are guilty
and trust God, and those who think they are all right and need nothing.

Says Romans 3:10-12: "No one is good – no one in all the world is innocent. No one has ever really followed God's paths, or
even truly wanted to. Everyone has turned away; all have gone wrong. No one anywhere has kept on doing what is right; not
one" (Living Bible). God is a pure and holy being, and, by comparison, man is evil, despite the fact that mankind does many
good things. Watching the news should convince us all that men's hearts are naturally bloodthirsty, and avaricious. Even when
men try their best, nothing they do is really pure.

Because God knows what men are like, he does not ask the impossible, nor say that when we are good enough he will love
us. He chose a different way through his son, Jesus Christ. Romans 3:19-28 explains it very well:

... all the world stands hushed and guilty before Almighty God.

Now do you see it? No one can ever be made right in God's sight by doing what the law commands. For the more we
know of God's laws, the clearer it becomes that we aren't obeying them; his laws serve only to make us see that we
are sinners.

But now God has shown us a different way to heaven – not by "being good enough" and trying to keep his laws, but
by a new way (though not new, really, for the Scriptures told about it long ago). Now God says he will accept and
acquit us – declare us "not guilty" – if we trust Jesus Christ to take away our sins. And we all can be saved in this
same way, by coming to Christ, no matter who we are or what we have been like. Yes, all have sinned; all fall short of
God's glorious ideal; yet now God declares us "not guilty" of offending him if we trust in Jesus Christ, who in his
kindness freely takes away our sins. Romans 3:19-24, Living Bible.

So, if you have had a problem with PMS, and you feel hopeless about yourself and the mistakes you have made, take
courage. The past is forgiven, and even the unwilling mistakes of the future are dealt with. You must put right as far as you
can the chaos PMS has caused in your life and others'. But what you cannot change you must accept and go on from there.

While it is never easy to be philosophical about having a rough time, it is worthwhile remembering that when PMS is a past
nightmare, life will be much richer and sweeter. A person who has experienced PMS will tend to be far more sympathetic
towards others who are suffering, and will be in a position to become a great blessing to many.

We can rejoice ... when we run into problems and trials for we know that they are good for us – they help us learn to
be patient. And patience develops strength of character in us and helps us trust God more each time we use it until
finally our hope and faith are strong and steady. Then, when that happens, we are able to hold our heads high no
matter what happens and know that all is well, for we know how dearly God loves us, and we feel this warm love
everywhere within us because God has given us the Holy Spirit to fill our hearts with his love. Romans 5:3-5, Living
Bible.

SUMMARY

Guilt can threaten to be overwhelming for a PMS sufferer. But all alike have sinned; and there is grace for all.

God's love and forgiveness, like his wisdom and strength, are infinite. The blood of Christ covers all the guilt of the believer.
"Be my feelings what they will, Jesus is my Savior still."

...
SECTION IV

PSYCHOSOMATIC MEDICINE: RELATIONSHIPS BETWEEN THE MIND BODY, AND SPIRIT

"Out of the heart are the issues of life"

(Proverbs 4:23)

CHAPTER 42

Mind or Matter? Don't Say: "No Matter, Never Mind!"

Only in recent decades has medicine become scientific to some degree. Yet it has flourished for millenniums because of the placebo effect – the power of the mind to bring healing to the body.

* * * *

We need a doctor about as often as we need a lawyer. Everyone has their own doctor dwelling within – the wisdom and power of mind and body striving continually for the homeostasis of health.

* * * *

The Placebo Effect

In his fascinating and invaluable book The Anatomy of an Illness, Norman Cousins tells of his time with Dr. Albert Schweitzer in Lambarere, Africa. On one occasion they watched a witch doctor at work. To the native specialist came a wide array of people, and Cousins was intrigued by the deft manner in which the witch doctor divided them into groups. One group received herbs for their complaints, another whose ills must have been deemed psychogenetic were treated to a performance involving dancing and incantations, while the third, who had problems essentially physical, were referred to Dr. Schweitzer's hospital for treatment.

"How does anyone get well who goes to a witch doctor?" asked Cousins of his host. Dr. Schweitzer smiled and said, "You are asking me to divulge the secret that doctors have kept for thousands of years, the secret known to Hippocrates and every doctor since. But I will tell you. Everyone ever made well is made so by the doctor dwelling within and the physician gives the encouragement that makes that possible." In other words, Dr. Schweitzer was referring to the placebo effect which must never be discounted as something only for the superstitious or unintelligent. The placebo effect is the mind's harnessing of the body's own powers to heal.

Nine out of every ten patients who attend a physician have a self-limiting illness. If they did not attend the healer, healing would still come, in many cases more quickly because not retarded by drug therapy. As Cousins points out, patients expect that a drug will be like an arrow to the target of the cause of the illness, but its actual effect is more like a shower of porcupine quills hitting all and sundry, good and ill. Thus, in every case, some of the effects, often even most, of each drug are negative.

About every three days, the average person experiences some sort of symptom which can be interpreted as the sign or precursor of illness. Ignored, almost all of these pass away. In practical terms this fact implies that over 100 times a year, a person can find an excuse for attending a doctor, but in almost every case that visit is unnecessary. Not only is the typical doctor's visit unnecessary, it can be dangerous. Once one invites medical examination, diagnoses may be made which are incorrect, diagnoses paving the way for treatment which can result in illness and even death. Most laypeople suffer from the illusion that medicine has a cure for every problem, and that the doctor knows unerringly what to do and what to offer his patient. The truth, rather, is as Dr. Eugene D. Robin has written:

One of the most alarming aspects of modern medicine is that, for most procedures, we know neither the diagnostic efficiency nor the therapeutic efficiency. Huge numbers of diagnostic studies, many of them invasive, are introduced into medicine, each with some morbidity and mortality, often without a general evaluation of their usefulness and often without an analysis of their role in the management of a specific patient.¹

So Robin concludes:

Try not to consult doctors for trivial matters. The risks of a needless visit to the doctor are greater than the risks of overlooking an important and treatable disease by staying away.²

Such counsel will sound like heresy to the orthodox. Armed with the well-known symptoms of cancer, the average person is frightened of delaying a call on his physician if there is the slightest possibility he needs help. Of course, Robin does not have the signs of cancer in mind but rather the vast mass of insignificant aches and pains which quickly pass away if ignored. It is a statistical fact that women attend doctors much more frequently than men, but there is no evidence that their larger number of visits brings greater benefit.

Few Medical Procedures Have Been Officially Screened

Usually it comes as a surprise to the layman to know that most medical procedures have never been authorized after general testing. As a significant Newsweek article on modern medicine tells us:

... there is nothing like a "standard" treatment for many ailments. Patients assume some government agency or medical society formally sanctions the way doctors go about their business. In fact, there's almost none of this ... Doctors still argue among themselves about circumcision – some say that it should always be done, others that it should never be done, still others that it makes no difference. "If we can't make up our minds about circumcision, a
simple procedure which has been in use for thousands of years, it's no wonder patients are baffled about whether they need extremely complex new treatments ..." Some doctors, for example, say stay off a sprained ankle; others say get back on it as soon as possible. Some suggest heart surgery for almost anyone with severe chest pains. Others say drugs, diet and exercise accomplish as much ... When a physician advises a patient to take drugs or have an operation, there is no final authority the patient can turn to for answers; he's on his own.3

An example that should be kept in mind is the fact that during the 1970s the frequency of heart operations for men tripled as the coronary bypass came into widespread use. It is now known that possibly only one in ten of these were justified. Operation types have their vogue and then frequently pass away leaving patients the poorer financially and physically. Again, however, we caution against throwing out the baby with the bath water. Much surgery is not only justified, it can be lifesaving. But in view of the fact that nearly a million tonsillectomies and adenopectomies have been done annually for years without justification, that more than a third of hysterectomies are likewise unnecessary, that more than 100,000 women a year have endured breast amputation without genuine cause – in view of these and other similar facts, one is wise to recognize that medicine, like religion, law, and politics is a two-edged sword.

Nowhere is this fact more easily demonstrated than with drug therapy. Dr. Donald M. Vickery records how Dr. Leighton Cluff and his John Hopkins Hospital associates followed up 714 patients of the hospital. It was found that 122 patients experienced 184 adverse drug reactions. Drug reactions had been responsible in the first place for 5 percent of the hospital admissions while 13.6 percent suffered a drug-related problem after admission and six of these died as a direct result of the drug therapy. In Britain, a similar survey found that 193 out of 731 patients suffered undesirable consequences of drug therapy. Seventeen of the 67 deaths that occurred among these patients were attributed to the drug therapy.

The Placebo Effect

Cousins, who now teaches doctors at UCLA, tells us that many medical scholars have believed that the entire history of medicine is actually the history of the placebo effect. He cites the comment of Dr. Shapiro:

... one may wonder how physicians maintained their position of honor and respect throughout history in the face of thousands of years of prescribing useless and often dangerous medications.4

The nonmedical mind staggers at the concept that inert substances can actually cause the rallying of the body's own health resources. But such is undeniably the case. Tests with placebos have shown that "dummy" morphine is 77 percent as effective as the real thing. According to Becher and Lasagna, the more severe the pain the more effective the placebo. Writing in the American Journal of Psychotherapy, Dr. Shapiro says: "Placebos can have profound effects on organic illness, including incurable malignancies."5

The placebo effect is not a deception. It is rather a harnessing of real powers within the body and mind. In harnessing the will to live, it proves there is no real disjunction between the mental and the physical. All sickness is an interaction between both, and any doctor who attends only to the one has missed his calling. For this reason the modern emphasis on intensive care units while yielding enormous benefits for some (especially premature babies) does little, or does harm, to others who panic in the impersonal machine-dominated environment. The doctor himself is the best placebo, and the best doctors know that the secret of care for the patient is caring for the patient.

Today about a third of students entering medical school are female. This may have tremendous impact for good. The reason is related to the foregoing, and is well summarized in the Newsweek article earlier cited. Keckley, a medical consultant, is quoted thus:

Middle-aged male physicians are unbelievably resistant to the idea that issues such as affinity and tone of voice are relevant to treatment. We've put patients behind one-way mirrors and let doctors watch as we interview them. Female patients say things like, "Quality is a doctor who talks to me before he tells me to take off my clothes." Male physicians often react vehemently, saying, "No way am I going to believe that makes a difference." For people who spend their lives giving care to the distressed, it's amazing how little doctors understand of the basics of tenderness.6

The emphases of this chapter are infinitely important. Ignorance in these areas can be fatal. A person buying real estate or a secondhand car is rightly cautious in both cases, but when the item being dealt with is one's own body the need for care is magnified a thousand-fold. For this reason it has been said, that for many people, the choice of a doctor is the most significant choice they make in their adult life. Remembering the biblical doctrine of the depravity of man and the ubiquity of sin, the Christian who is intelligent has a head start in avoiding unnecessary pain and remaining alive. Such a person will thank God for the tremendous medical advances of this century, and yet be constantly conscious of the fact that the yield is "a mixed bag" as in every area of human activity. If the price of liberty is eternal vigilance, how much more the price of health?

The wise layperson will lay hold of and apply the truth medicine has used for centuries – the influence of the mind upon the body. Mercifully, this can be done without using the sometimes harmful vehicles professionally employed to harness the placebo effect.

SUMMARY

The physician's chief secret is his knowledge of the placebo effect – that often his successes come, not from his procedures, but from the patient's mind.

Most trips to the doctor are unnecessary and carry a measure of risk.

Many medical procedures have their day and then are rejected as useless.

The increasing number of women entering medicine is fraught with great benefit because women are more inclined to tender regard for sufferers.
REFERENCES
1. Eugene D. Robin, M.D. Medical Care Can Be Dangerous to Your Health, p. 28.
2. Ibid., p. 54.
Like railway tracks the paths of truth and error are very close together but diverge at significant points. Positive thinking is true, but not all true.

* * * *

The Commission's report also indicates that, at any given time, up to 25 percent of the population is estimated to be suffering from mild to moderate depression, anxiety, or other emotional disorder.

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The Bible doesn't merely treat the disease-producing factors of envy, self-centeredness, resentment, hatred and immorality, but it strikes at the cause with an effective and curative manner: "Those who belong to Christ have crucified their old nature with all that it loved and lusted for."

S. I. McMillen, M.D., None of These Diseases, p. 67.

* * * *

With God all things are possible.


* * * *

A cheerful heart has a continual feast.

Proverbs 15: 15 RSV.

* * * *

The Great Discovery

William James once said that the greatest discovery of the century was that by changing our thinking we could transform our lives. So look at these two words: images, imaginations.

You can see that the words are related. So are the facts represented. Too many of us worship the chimeras of our own minds, the ephemeral changing "will-of-the-wisps" of our imaginations. Listen! Your imagination can make you sick, or it can help to make or keep you well. You are not what you think you are; but what you think – you are!

Take hypnotism. It is not what most people suppose. It is not a magical trance whereby the person involved is totally unconscious of his or her surroundings and is fully surrendered to the hypnotist. No. Hypnotism is but an extreme example of the power of the imagination. The well-known illusionist, Kreskin, after nineteen years of hypnotizing thousands of subjects, has publicly offered $100,000 to anyone who can prove the reality of the hypnotic trance. Actually, hypnotism is just the extreme illustration of the power of suggestion upon the imagination.

People reading a novel or watching a film or play, often manifest physical symptoms of their mental experiences. The racing heart, or sexual arousal, is well known in such cases. All of which, through the ages, has been the basis of voodoo, shamanism, Coueism, and positive thinking. These are all perverted usages of the divinely ordained power of the mind. Scriptural admonitions regarding hope and faith are based on the power of the imagination to motivate believers to vigorous pursuit of the good and resistance to the evil.

Every sickness is a minideath, and nothing scares us more than death. The specters evoked by our imagination, when ill, increase the production of body chemicals called catecholamines, which can adversely affect the heart. Fear constricts the blood vessels so that an unhealthy heart may have more to cope with than it can handle. Anxiety and worry take more lives than virulent bacteria.

Our Mental Imagery Helps Determine Health and Sickness

When Norman Cousins was virtually given a death sentence by his physicians years ago, he did all he could to muster favorable mental images and the accompanying emotions. He secured humorous films and books and gave himself over to them for hours a day. Some say, oversimplifying the reality, that he laughed himself back to health. Read the story in Cousin's Anatomy of an Illness.

Another illustration of the importance of our topic is found in the fact that the most important book of American medicine, The Principles and Practice of Medicine, by William Osler, had for its first thirteen editions an opening chapter on typhoid fever. But that chapter has been displaced by an introduction which deals with the influence of the mind on the physical health. Its title is "Psychosomatic Medicine."

It has been customary – and helpfully so – to divide illness into two groups, functional and organic diseases. The first group is chiefly the result of wrong use of the imagination, while the second has to do with physical changes in bodily organs. But the real truth is that no disease is purely functional, or purely organic. We are composed of body and mind as surely as an omelet is made of both the white and yolk of an egg.

Think of the causation of fainting, blushing, goose bumps, trembling – and tears and laughter most of all. Each and all of these can be provoked by mental sensation. Fear, and embarrassment, and other emotions, trigger the action of the hypothalamus,
that part of the brain that controls the involuntary or autonomic system. The so-called automatic functions of the body are interfered with by strong feelings. The hypothalamus not only responds to such physical factors as heat, cold, etc., but also to joy and sorrow. While under emotional stress, the normal functioning of our physical system becomes increased or decreased. Ultimately, if the same triggering takes place repeatedly, some form of functional disease results which after a while may become organic.

When Scripture tells us that "A merry heart doeth good like a medicine: but a broken spirit drieth the bones" (Pr 17:22), it is offering us a key to health of more value than the whole pharmacopoeia.

In light of this, the admonitions of Scripture against fear, worry, and other depressing emotions, take on new significance. It is the Maker of our physical and mental organism who condescends to tell us how to live so as to have health. We are not speaking about some infinitesimal proportion of human experience. Speaking very conservatively, at least a third of all illnesses spring from emotional disturbances. Another third are complicated by the same. Other estimates suggest that as much as 90 percent of all illness is caused by negative thoughts.

The Christian Surrenders Every Thought to Christ

The practical import of all this is the need to jealously guard every thought and feeling of the mind. We are to bring every imagination into captivity to Christ (see 2 Cor 10:5). We shall choose carefully our company – people, books, plays, amusements, etc., remembering that "whatsoever a man soweth, that shall he also reap" (Gal 6:7). We are told what to think about in Philippians 4:8 RSV:

Finally, brethren, whatever is true, whatever is honorable, whatever is just, whatever is pure, whatever is lovely, whatever is gracious, if there is any excellence, if there is anything worthy of praise, think about these things. Never forget that God gave you the ability to laugh. When Abraham Lincoln was reproached for telling humorous anecdotes, he replied, "Gentlemen, if I could not laugh, I would die." That is the case with many who labor under heavy stresses.

"Every Day, Every Way, I'm Getting Better and Better." This was the motto of the famous Coue, who felt that all people could be well if they only thought so. As with all heresies there is a certain degree of truth in that belief. What scientists call the placebo effect should be understood by all seeking for health. In substance, that truth is this:

Convictions of the mind, planted consciously or unconsciously have a powerful effect upon the body, increasing its proneness to disease or its resistance thereto.

Scripture says, "For as he thinketh in his heart, so is he" (Pr 23:7). We are urged to look well to the state of our heart for "out of it are the issues of life." Jesus could speak of "the good treasure of the heart" and "the evil treasure of the heart." Woe to that person who forgets that mind and body are as closely interwoven as the warp and the woof of a woven garment.

All of history testifies to the power of suggestion, the influence of positive thinking. The magic of voodoo and witch doctors, the healing influence of the respected old country doctor, the power of the shaman, the magic of the hypnotist, and the beneficial effect of mere chalk tablets dispensed as medicines – all witness to our theme.

So-called “benefits” from psychic surgery fall into the same category. Thousands went by jetliners to the Philippines decades ago to give fortunes to charlatans, yet returned in better health (temporarily)!

Faith and Fear, Like Oil and Water, Don't Mix

We tend to do what we think about all day long, unconsciously as well as consciously. Our dreams testify to this. If anyone examines a remembered dream, in most cases its elements can be recognized as springing from experiences of life. Part of the reason for the success of great athletes lies in their confidence in their ability. He who thinks he can, usually can. He who thinks he can't, usually can't.

In 2 Timothy 1:7 we read, "For God has not given us the spirit of fear, but of power, and of love, and of a sound mind." The book of Hebrews tells us of men and women who "out of weakness were made strong." And how was that done? The whole chapter tells us – it was by the power of faith. Faith in God is positive thinking at its best. When we worry and are fearful, we are demonstrating faith in evil. True Christian experience revolves around "peace and joy in the Holy Spirit," as well as righteousness (see Rom 14:17).

A Christian is the steward of God, and in all things it is required that a steward should deal honestly. It is wrong even to waste our thoughts. This does not mean that every thought must be upon a solemn topic, but in all our thinking we must have the supreme glory of our Maker in view. The text we have quoted from Timothy was addressed to a young man who had poor digestion and many infirmities. He may have been inclined to negative thinking about himself, his work and his world. Paul's letters to him are filled with admonitions to think correctly. He is to take medicinal wine for his health, but above all he is to cherish love and a sound mind. He is not to be afraid, or to let people despise him. Timothy represents most of us. There are not many naturally strong people. Despite our weakness, we can all be made strong by faith in God.

Blessed is that person who fills his mind with the promises of Scripture. These promises are leaves from the Tree of Life and they will bring healing to those who digest them. Scripture has promises for every situation – for poverty, trial, sickness, bewilderment, persecution, inadequacy, guilt. We can never be placed in a position for which God has not made provision. He has a thousand ways of providing for us of which we know nothing. If we will but accept the one principle of making the glory of God supreme, we will find difficulties vanish and a plain path before our feet, and our burdens will roll away. Has he not promised, "Come unto me all ye that labor and are heavy laden and I will give you rest" (Mt 11:28). The promises apply here and now, but they have their ultimate fulfillment in eternity.

We are slow to realize that praise is as much a duty as prayer. We neglect too much the healing power of psalm and song. We forget to cherish and verbally express the gratitude that heals. If we would but thank God joyously every time we have
evidence of his love for us, our whole life would be changed. Lincoln affirmed that most people were just about as happy as they made up their minds to be.

Experience isn't what happens to us, it's what we do with what happens to us. Realize that the most powerful thing in the world is the Word of God. By that Word the heavens and the earth were made, storms were quieted, demons cast out and disease made to flee. When your mind is possessed by that Divine Word, it becomes linked to the omnipotence of God himself. This is true positive thinking.

It is imperative that every Christian learn the relationship between positive thinking and life's inevitable trials and stresses. Because tragedy is a part of every life, handling stress includes dealing with tragedy. When we truly rest in the love of God, life's buffetings can be viewed as the winds driving our vessel to its heavenly haven. With Paul we will be able to say: "Though our outward man perish, our inward man is renewed day by day." The following chapters, especially "The Delays of Love," "That Dreadful Fatigue" and "The Secret of Happiness" continue the theme of this chapter and illustrate it further showing how every Christian who chooses to think rightly can triumphantly survive life's outrageous slights and buffetings. The gospel is the great key, and we have set it forth in the chapter "The Only Two Religions in the World."

SUMMARY

William James said that the greatest discovery of the century was that by changing our thinking we could transform our lives. A positive-thinking philosophy, like all heresies, contains a vast amount of truth. It is based on the divinely ordained power of the human mind.

Faith, hope, and love are the mighty powers of the soul and have tremendous influence upon the health of the body and achievements of the person.

Most illnesses are functional rather than organic and spring from the wrong use of the imagination. When Scripture says that "A merry heart doeth good like a medicine; but a broken spirit drieth the bones" (Pr 17:22) it is teaching us the value of right emotions and the danger of bad ones.

Laughter, praise, prayer, song, and gratitude itself are God's great gifts to enhance our health of body, mind, and spirit.
CHAPTER 44
Why Do We Never Learn? (Part One)

Only those who know the biblical teaching about the depraved nature of man will be sufficiently on guard against their own tendencies to sin and folly. The bad news of our fallen estate leads us to continual affirmation of the good news of the gospel—"this man receiveth sinners." Luke 15:2

The heart is deceitful above all things, and desperately corrupt; who can understand it?
Jeremiah 17:9 RSV.

The Trouble Is Human Nature

Though I first heard the words nearly fifty years ago, they still ring in my mind. There in tropical North Queensland, the land of crocodiles and monsoons, of sharks and cyclones, of sweaty bare feet, and boys who often ran wild like animals, I emerged imperceptibly into my contemporary heathen society. At the theater each Saturday afternoon, a theater where the wall blinds rolled up in the evenings so cool breezes could blow upon excited cheeks, I enjoyed the adventure stories of sin and judgment. For in those days, before the existentialist philosophy hit us, evil in the screen stories inevitably brought judgment. At that time they had very brief police stories, among what we called the "shorts," and the moral to each of these stories was given by the speaker at the close—"crime does not pay!" Many of you also heard him. But in our souls we were not convinced.

Why is it so hard to change one's health habits? Why do we make the same mistakes again and again and again? From whence can come the motivating power to enable us to do what we know we ought to do? That's the theme of this chapter and the next. Drawing from the best medical book in the world, we shall tell the truth about human nature and set forth the sovereign remedy for all our ills.

Why is it that after a child has touched a hot stove once or twice he never goes near it again, but adults who have been "burnt" time and time again by wrong moral choices never learn quickly the obvious lesson? And yet the moral has been told and acted out millions and millions of times every day in every city and every country on earth.

Intuitively We Know Sin Is Folly. Yet ...

The reason that a searcher after revealed truth does not need to understand Hebrew, Greek, Aramaic, archaeology, textual criticism, higher criticism, exegesis, hermeneutics, apocalyptic, dogmatics, etc., etc., is because the truth of Holy Writ is self-authenticating. Scripture affirms that the universe is moral because it has been made by One who is innately holy and just. Scripture teaches that there is a difference between right and wrong, as sharp as the difference between night and day, and life and death. Scripture teaches, moreover, that there is a cause-effect relationship operating throughout the whole universe. None of this is really hard to believe, as every person's experience is a microcosm of what is happening throughout the whole world. Modern science could never have gotten started but for the belief in a creator who ran the universe by law and, therefore, necessitated the cause-effect relationship that permeates all activities. The modern scientist assures us gravely that when a baby throws its rattle out of the baby buggy, it affects the motion of a furthest star. And yet, convinced though we are that the universe is run by law and that that law at its essence is moral, we never learn sufficiently to cease being deceived repeatedly by sin and folly.

It is impossible to read a book or a magazine concerning human affairs, or listen to radio or television newscasts, without finding evidence for our thesis. History and biography are replete with illustrations and examples.

Take, for instance, Obersalzberg Mountain. Never heard of it, you say? It was Hitler's mountain and overlooked the town of Berchtesgaden. The scenery is magnificent. In the Wolf's Lair, the fortress built by the Nazis high atop Obersalzberg, Hitler found frequent refuge. At this mountain he finished writing Mein Kampf before he came to power. The entire mountain became a Nazi retreat for party leaders, Gestapo and others.

If you go to Berchtesgaden today to hunt for Hitler's headquarters, you will find the driveway completely blocked and overgrown. If you get to what was once Hitler's home, you will find the concrete molding and the bricks crumbling. Only a few concrete blocks and iron ventilation shafts remain of the once-imposing house. A visitor described it as "a dead, dead place!" And yet it was once the nerve center for the Third Reich which was intended to last a thousand years.

Of course, no European in 1941 would have said that crime did not pay. Around him was all the evidence that crime did pay, for the victorious Nazi divisions had conquered most of Europe. But this only shows once more how correct Scripture is when it not only affirms that sin brings judgment but also warns us that sin is a sowing which may take time to come to harvest.

Let us come closer home. Newsweek, of June 4, 1984, contained a story concerning the multitudes of Americans now struggling to break the grip of drugs and alcohol. We quote:

The snapshot is frightening: A grinning skeleton of a man wearing a Lacoste shirt. "Look at that," says Paul, 37, a lawyer and owner of a trucking firm, "Matchsticks for arms and slits for eyes. Eighty-seven pounds and coked out of my gourd." In the five years before the photo was taken, Paul explains, he "snorted away, his wife, his suburban home and $500,000. After the drug ate away the cartilage inside his nose, he bought liquid cocaine and droppered it into his eyes. Then a year and a half ago, shortly after posing for the cadaverous photo, Paul pointed a .38 pistol at his head...

The same article goes on to speak about the fact that 35,000,000 Americans were users of illicit drugs in 1982.
Of course, there are much more "respectable" crimes against society and the self. Illicit sex is one of these. It is astounding that in recent years even prominent figures who helped inspire the sexual revolution of the sixties have begun to confess that it didn't work. Such men now acknowledge that casual sex does not offer a satisfying meal but rather a plastic-wrapped, fast-food product. The fact that between 9 and 15 million new cases of sexually transmitted diseases are contracted each year in this country alone gives adequate support to such confessions from another angle – not one of satisfaction but of health. Were it not for the fact that it is many of the same people contracting additional sexual diseases within their own generation, the above-mentioned statistic would mean all Americans from early teens up would have venereal disease.

A limited percentage of the younger generation are beginning to suspect that moral crime does not pay. Said one boy recently:

I don't care whether it's wrong. I want to know whether it's smart. Now don't give me your old religious pitch. I'm looking for some adult who will cool his moral fever long enough to tell me what is smart for me. I have this girl on the make and she says she wouldn't mind. But I want to know, would I mind? What am I going to think of me? You can go anywhere in the world to get away from a pregnant girl or from a boy who took it away from you but you can never get away from you. Every morning when you get up you are going to look in the mirror and there you are.

Sex Misused Brings Heartache

We have heard from childhood that it's love that makes the world go around, but somehow we've confused love with lust. Sex was never meant to be a main dish in the feast of life. It's a garnish. True love has much more to do with giving than with taking, and with improving things rather than desecrating them. Marriages launched by sexual attraction alone have no staying power. Said a typical mismated wife, "You've heard of the Sphinx – well, I married it." Despite the mixing of metaphors, it's appropriate to say that silence from a spouse is a far cry from the whisperings of sweet nothings before sexual attractions became dim.

I have toyed with the possibility of one day writing a book drawing from modern biographies evidences that the Christian way is the only real way to live successfully. Tragically, the people who best demonstrate that moral crime does not pay rarely have any wish to write autobiographies. So far as we know, Howard Hughes didn't write one. Among his gods had been financial success and he had succeeded indeed. He wasn't a millionaire, he wasn't a multimillionaire, he was a billionaire. It's estimated that he owned over $2 billion worth of real estate, etc. What was his life like in those closing years? Half lunatic for the final fifteen years of his life, he neglected himself dreadfully, living in hotel penthouses, from time to time. It cost millions of dollars just to take his entourage of four doctors and six Mormon helpers (his guards), from country to country. He would live in a hotel penthouse and there let his straggly beard grow down to his waist, his matted hair fall halfway down his back, refuse to cut his fingernails until they were two inches long, and his toenails until they looked like yellow corkscrews. What a miserable life for anybody, let alone a man who could have bought anything he wished in this world – except peace, health, and happiness. Of course, not all who worship mammon experience such a weird climax to life. It may be that the air crashes of Hughes had paved the way for his eccentricities. But having said that, how many people do you know of who, having made the pursuit of money the first thing in their life, have gone on to find health and happiness trailing along behind will-of-the-wisp wealth?

Take our personal health habits. Everybody knows that they ought to exercise. Some are aware that the most sedentary have eight times more likelihood of an early death than the most active. But only the minority really want to exercise. We don't really believe that God meant it when he declared, "In the sweat of thy face shalt thou eat bread" (Gn 3:19). We forget that exports must match imports, and, consequently, about one in three in this country has a problem with encroaching obesity, and about one in four regularly goes on diets. We take in platefuls of compacted energy by way of imports, but our exports are very much deficient in the matter of the expenditure of energy.

Think also of the 50 million in this country who still worship at the shrine of nicotine. Ninety percent of them have tried to give up smoking and failed. Apparently they don't really want to give it up enough. If we watched a man burning ten-dollar bills, we would know he was crazy. Or if he drenched himself in gasoline and went looking for a match, we would suspect the same. Yet this habit of over 50 million in this country is not different in principle to either of these. May I use again the love letter of one smoker that I have quoted in my book on stress?

You are closer to me than any living creature, reposing in my pocket near my heart. With my lips, I caress you more than I do my family. When I awake, my thoughts turn to you and remain there all the day. I worship at your shrine with burnt offerings, constantly. At my desk, the fires seldom go out on your altar. I scatter your incense of smoke in the faces of my loved ones. I call upon you more than upon my creator. I pay more money for you than to the church and charities combined. I risk my life for you. By smoking, I take one chance in eight of having lung cancer and twice as many chances of death from heart attack. I take no such risk for my religion. I bear in my body the marks of my devotion to you – the color of my fingertips and skin. My body is so soaked with nicotine incense that when I perspire, many people hold their noses and walk away. A new light is dawning. I have become your slave. I do not smoke but suck one end of the cigarette while you smoke at the other. I am a sucker!

Let God Be God!

Why is it that we do not learn that moral crime indeed does not pay? Why are we so much like tortoises in the speed with which we regress from our wrong habits? Scripture has the only right answer. It tells us that the heart of man is desperately wicked, and every imagination of his heart from his youth up is evil continually. Scripture says that we have cut the cord that once united us to God. An unholy spirit dwells within us instead of the original Holy Spirit. It is time for all sane people to look again at the biblical doctrine of original sin, a doctrine of human depravity. Let none ever be ashamed to consider the religious answer to the human dilemma. All other answers have been tried and failed. If God exists, then outside of him there is nothing but death. A moment's thought should convince us that he either matters tremendously or he doesn't matter at all.

SUMMARY
The chief problem in all reformation, including that of health habits, is our treacherous, deceitful, depraved human nature. Therefore, the gospel is our only hope as we face reality.

All moral truth is self-authenticating. Light proves itself, we never prove light.

The universe is run by law and that law at its heart is moral.

History and biography are replete with illustrations and examples that only righteousness works in a permanent sense.

REFERENCE
CHAPTER 44
Why Do We Never Learn? (Part Two)

To the degree we are convinced of the corruption and weakness of our own human nature we are delivered from its tyranny.

We know that the law is spiritual; but I am carnal, sold under sin. I do not understand my own actions. For I do not do what I want, but I do the very thing I hate. For I delight in the law of God, in my inmost self, but I see in my members another law at war with the law of my mind and making me captive to the law of sin which dwells in my members. Wretched man that I am! Who will deliver me from this body of death?

Romans 7:14, 15, 22-24 RSV.

For the desires of the flesh are against the Spirit, and the desires of the Spirit are against the flesh; for these are opposed to each other, to prevent you from doing what you would.

Galatians 5:17 RSV.

... but I pommel my body and subdue it, lest after preaching to others I myself should be disqualified.

1 Corinthians 9:27 RSV.

The Problem Behind All Other Problems

No Christian need be ashamed of affirming that the doctrine of human depravity gives the only true explanation for human sorrow and folly. Such a conviction has been forced upon many in recent years who once declined to have anything to do with religion. For example, the well-known philosopher, C. E. M. Joad, wrote a book called God and Evil, in which he set forth a change of mind as regards his former agnosticism:

Evil is not merely a bi-product created of unfavourable circumstances. It is too widespread and too deep-seated to admit of any such explanation; so widespread, so deep-seated that one can only conclude that what the religions have always taught is true, and that evil is endemic to the heart of man.

I am claiming no credit for this conclusion. On the contrary, it is ground for humiliation to have come to it so late.1

Centuries ago David Clarkson, one of the Puritans, had this to say as he preached on Psalm 51:5:

The end of the ministry of the Gospel is to bring sinners unto Christ. Their way to this end lies through the sense of their misery without Christ. The ingredients of this misery are our sinfulness, original and actual; the wrath of God, whereto sin has exposed us; and our impotency to free ourselves either from sin or wrath. That we may therefore promote this great end, we shall endeavor, as the Lord will assist, to lead you in this way, by the sense of misery, to Him who alone can deliver from it. Now the origin of our misery being the corruption of our nature, our original sin, we thought fit to begin here, and therefore have pitched upon these words as very proper for our purpose: "Behold, I was shapen in iniquity; and in sin did my mother conceive me."2

The Bible is a wonderfully concentrated book. It refuses to be diverted from its one topic of man's need of salvation and the remedy. Therefore, the sin of man is emphasized on every page. We read of "the sin which doth so easily beset us" (Heb 12:1); "the old man, which is corrupt" (Eph 4:22); "The carnal mind which is "enmity" against God" (Rom 8:7); "sin that dwelleth in me" (Rom 7:17); "The body of sin" (Rom 6:6); "The plague of the heart" (1 Ki 8:38); "Foolishness bound up in the heart" (Pr 22:15); "The stony heart" (Ez 11:19); "The evil treasure of the heart" (Mt 12:35); and "the poison of asps" (Rom 3:13).

We all know that sin always seems attractive, otherwise we would not be caught. It is like the butter that Jael brought to Sisera "in a lordly dish." This is why sexual sin, in particular, is so attractive, as it is associated with youth and beauty. Could we, however, see sin as it really is, we would behold a black and misshapen monster. Scripture compares it to the greatest deformities and the most filthy and repelling objects to be found in this world. For example, sin is likened to 1) the vomit of a dog and the wallowing of a sow in the mire (2 Pe 2:22); 2) a dead and rotting body (Rom 7:24); 3) the scum of a seething pot in which is a carcass (Ez 24:10-12); 4) the blood and pollution of a newborn child (Ez 16:4, 6); 5) the stench which issues from the mouth of an open grave (Rom 3:13); 6) putrifying sores (Is 1:5, 6); 7) a menstruous cloth (Is 30:22); 8) gangrene (2 Tim 2:17); 9) the dung of filthy creatures (Php 3:8). No wonder Scripture also calls it "an evil thing and bitter" (Jer 2:19). "The abominable thing" which God hates (Jer 44:4).

Description of Our Enemy

In his book Peace with God, Dr. Billy Graham gave a marvelous summary of sin and its results:

All mental disorders, all sicknesses, all destruction, all wars find their root in sin. It causes madness in the brain, and poison in the heart. It is described in the Bible as a dread and prostrating disease that demands a radical cure. It is a tornado on the loose. It is a volcano gone wild. It is a madman broken loose from the asylum. It is a gangster on the prowl. It is a roaring lion seeking its prey. It is a streak of lightning heading toward the earth. It is a guillotine cutting off the head. It is a deadly cancer eating its way into the souls of men. It is a raging torrent that sweeps everything before it.
Because of sin every stream with human crime is stained, every breeze is morally corrupted, every day's light is blackened, every life's cup tainted with the bitter, every life's roadway made dangerous with pitfalls, every life's voyage made perilous with treacherous shoals. Sin — destructive of all happiness, darkening the understanding, searing the conscience, withering everything, causing all tears of sorrow and all pangs of agony, promising velvet and giving a shroud, promising liberty and giving bondage, promising nectar and giving gall, promising silk and giving the shirt of sackcloth.\(^3\)

It's because we do not understand the seriousness and the depths of our sinful nature that we never learn without special help from God. We are inclined to think of sin as something done occasionally, whereas the biblical teaching is that everything we do is imbued with sin because of our sinful nature. Similarly, too often when we think of sins we are thinking of outrageous acts rather than selfishness and pride which taints all. Robert Burns, in his *Letter to a Young Friend*, was aware that the trouble with most of us is our sinful weakness rather than our outrageous behavior. He had this to say:

I'll no say, men are villains a':
The real, harden'd wicked,
Wha hae nae check but human law,
Are to a few restricked;
But, och! mankind are unco weak
An' little to be trusted;
If Self the wavering balance shake,
It's rarely right adjusted.\(^4\)

Let us never forget that there were very good men in the group that drove Christ to his death. Look at the faces of the men around the cross. They tell us things about ourselves. Those men still live in our society today, in our churches, in our homes. There at the cross were Pharisees who were rigorous and self-righteous. There also were relaxed and casual Sadducees. In the background of the Calvary scene you may see the treacherous Judas, blasphemous and denying Peter, the vacillating Pilate, seared Herod. But you see there also the conforming soldiers and the acquiescent mob. Are we not all there?

An English writer reminds us that:

Fundamentally there is only one sin — the rebellion of the human will against the Will of God. In so far as my own will is rebellious, it is in tune with every act of murder, rape, or oppression committed this day in the world. My private acts of selfishness committed to-day, trivial though they may seem to me, nevertheless range me at the side of those whose more sensational deeds of cruelty or lust publicly advertise the rebellion of the human will. They bring me into a deep, sympathetic alliance with the murderer, the swindler, and the debauchee. I too, like them, am in rebellion. I too, like them, am serving the self; a little more cautiously and subtly perhaps, being rather more sensitive than they to the earthly cost of extravagance in these matters; but what heed does God pay to that added touch of worldly caution and subtlety? He looks down to-day upon a human race engaged in obedience or disobedience ... there is no third alternative, no discreet maintaining of silence between the praising and the blaspheming throngs. In every act we praise or we blaspheme.\(^5\)

Stunning is it not, to realize that in every act we either praise or we blaspheme? That in every act we side either with or against God. There is no neutrality, we are all the day choosing between Christ and Barabbas, between God and the devil.

**Our Real Enemy Comes Unexpectedly or in Disguise**

If a besieged company in a fortress were ever looking over the parapet to the east, expecting devastation from that quarter, would they not have been grateful to someone wiser who pointed out that their real enemy was coming from another point of the compass? Should not we be grateful to God that he has told us again, and again, and again, that our real enemy is not what we think it is? It is not our poverty or straightened circumstances. It is not the evil of other people. It is not the cruelties of nature or anyone of a thousand things which we blame. Our real evil is within. Dwight L. Moody was right when he declared that he had had more trouble with himself than any other man he had ever met.

The warnings of God are as loving as his promises, and how constantly he warns us against our indwelling depravity. According to Acts 28:27, sin has dulled our hearing. According to Ephesians 4:18, it has darkened our vision. According to Matthew 13:15, it has twisted our affections. According to Isaiah 53:6, it has led our feet into wrong paths. According to Romans 8:7, it has cameralized our thinking. According to Romans 3:13, 14, it has poisoned our speech. According to Romans 5:12, it has deadened our spirit. According to Luke 15:32, it has deprived us of the comfort of God's house. According to Ephesians 2:1, 2, it has placed us within the devil's grip, and we are dead in trespasses and sins.

There is no part of man's nature but has come under the dominion of sin. In his sin man is compared to 1) an adder for his venom (Ps 58:4); 2) an ass for his stubbornness (Job 11:12); 3) a bear for his cruelty (Dan 7:5); 4) a canker worm for destructiveness (Joel 2:25); 5) a dog for uncleanliness (Pr 26:11); 6) a dragon for desolation (Job 30:29); 7) a fox for his cunning (Lk 13:32); 8) a leopard for fierceness (Dan 7:6); 9) a lion for raving (Ps 22:13); 10) a moth for frailty (Job 27:18); 11) a sheep for stupidity (Is 53:6); 12) a spider's web for flimsiness (Is 59:5); 13) a sow for her filthiness (2 Pe 2:22); 14) a viper for his poison (Mt 23:33); and, 15) a wolf for his voraciousness (Jn 10:12).

**Morality, Like Light, Is Self-Authenticating — It Proves Itself**

Moral truth is self-authenticating. Even in the darkest hour when we seem to be doubting everything, one thing remains certain. Even if there were no God and no heaven and no hell, we are internally convinced that it remains better to be generous than selfish, chaste than licentious, true than false, brave than a coward. But the question is, how is it to be done?

When Professor Jordan became convinced of the error of his intellectual ways, he wrote a book to the world making his confession and urging men to find true religion as the only remedy for evil. He pointed out that the teachers of religion varied in a number of ways, but that through their teachings ran a number of threads that were fairly clear and consistent. He suggested...
that religious teachers were agreed on the necessity of these things – to be kind, gentle, compassionate and just; not to be self-seeking; to discipline, even in some cases to suppress the bodily passions; not to set much stock on the things of this world; to respect the rights of others, treating them as not less important than oneself; to love them so far as one can, and to love and fear God. Then he added these words:

But the way of life which the religious enjoin cannot be lived without assistance. Though the spirit is willing, though, that is to say, the true self desires only what is good and to be good, the flesh is weak and the body, which is the source or the vehicle of all manner of evil desires, deflects the true self from its objectives, or so blinds it that it cannot perceive them. Hence arises temptation, which is a conflict between two motives, a good and a bad, often resulting in a yielding to the bad. Because men are by nature sinful, we cannot always resist temptation; we cannot, therefore, lead the life which the religious enjoin, unless God helps us to do so. If, however, we pray to Him for help it will be given. Thus it is only through the assistance of Divine Grace, as it is called, that man can succeed in living aright. "I clearly recognize," says St. Catherine of Genoa, "that all good is in God alone, and that in me, without Divine Grace, there is nothing but deficiency."

"The one sole thing in myself," she continues, "in which I glory, is that I see in myself nothing in which I can glory." The question of the "how" that Joad has addressed is answered clearly by the New Testament. It tells us there is no other way than the way of the expressive power of a new affection. So Paul could write in 2 Corinthians 5:14, 15, RSV, "For the love of Christ controls us, because we are convinced that one has died for all; therefore all have died. And he died for all, that those who live might live no longer for themselves but for him who for their sake died and was raised." Every great life has been under the constraint of some mastering principle or influence. As Spurgeon once pointed out, a man who is everything by turns, and nothing long, is a nobody; and a man who wastes his life on whims and fancies, pleasures and pleasures never achieves anything. Such a person flits over the surface of life and leaves no more trace than a bird upon the sky. But a man becomes great even for mischief when he becomes concentrated. Just as horses must be harnessed and steam must be confined, so the energies of man are powerful when motivated by something greater than anything within him.

Not Merely Information but Motivation Is Our Great Need

Not the life of Christ, not the teachings of Christ, but his sacrificial death alone provides the motivation that we need. It offers a fulcrum and a lever that can heave our lives up to the heights. This is the only way we can get out of ourselves. It is of no use to try and whip ourselves up to certain religious emotions in order to discharge certain duties. Only when faith is used as an eye to focus upon Christ on the terrible tree, and the hand to lay hold of him as a personal redeemer, shall we become united with the very power of the heavenly throne itself. If we want ice to melt, we put it out in the sunshine, and if we want a mirror to gleam, we do not spend all our time in polishing it, but rather we carry it where it can catch the sun's rays and flash them back in glory. Scripture says, "We love him because he first loved us" (1 Jn 4:19). All that we do that is good is but an echo of God's good.

To contemplate Calvary and to recognize our part in it is to find in God a new center. To understand the meaning of that event is to find self displaced. We can no longer live to ourselves, says the apostle (Rom 14:7; 2 Cor 5:15). To know that we are loved, despite what we are, inclines us to love others despite what they are. To see the evidence of the patience of God towards us inspires us to be patient with the rest of our kind. To catch a glimpse of the hope of Paradise offered to a penitent thief arouses in us an undying hope which can transcend "the slings and arrows of outrageous fortune." To behold Christ's willing subjection to his crucifixion energizes us in a way that nothing else can do.

All other lives lose their power over men, but not so the love of Christ. Think of what it has done through the ages. There was Peter – that bronzed, brawny fisherman, who knew about boats and nets and sought only the happiness of a draft of fishes. But see him again after Calvary and Pentecost when he was prepared to be crucified upside down if it could glorify his Master. Look at John, the Son of Thunder, who after his conversion could write with a pen dipped in love. Look at the fanatic Saul breathing out cursings against the Christians; and then behold him after his transformation – Paul. He has done more to influence the world for good than any other man except Jesus Christ. Although his own great theme was faith, a faculty which enabled him to surmount perils on land and sea, yet he acknowledged that greater than faith was love. He had seen that love in the Christ who visited him from heaven, and he portrayed the character of Christ in his famous hymn to love in 1 Corinthians 13. Look at Athanasius who was prepared to stand against the world. Look at Knox who never feared the face of men. Behold the transformation of men like Augustine and Luther and Bunyan and Wesley. Nothing but the gospel could work such wonders.

Your only problem and my only problem is the sin problem – the sin problem that leads us to love the things that could destroy us and to hate the things that could save us. But "whosoever shall call on the name of the Lord shall be saved" (Acts 2:21). Shall we not call on God repeatedly to give us an understanding of those hours in which he bare his heart of love to the universe? Call upon him until he reveals that we, too, died on that cross, and that we are now Christ's; and the only life that we have is the one he has given us. Then we will confess that we are not our own, for we were bought with a price. Then it will be true as we behold heaven's wondrous grace that "sin shall not have dominion over you, for ye are not under the law, but under grace" (Rom 6:14). Henceforth we shall live no longer for ourselves but for him who for our sake died and was raised again. There is no other way to right living, to health of body and soul.

SUMMARY

The doctrine of human depravity gives the only true explanation of human sorrow and folly. The sin of man is emphasized on every page of Scripture in order to warn us against it. Sin always seems attractive, otherwise we would not be caught by it. Fundamentally there's only one sin – rebellion of the human will against the will of God. In every act we either praise or blaspheme God.
Private acts of selfishness range us on the side of those guilty of murder, rape, or oppression.
Even the born-again man has an old nature to continually fight. Sin remains though it does not reign in the believer.
Teachers of religion through the centuries and in all countries have varied in a number of ways but most have been agreed on the necessity of kindness, gentleness, compassion, justice, discipline, and reverence.
Every great life has been under the constraint of some mastering principle.
Appreciation of Christ's sacrificial death alone can provide the motivation that sinful man requires to resist evil.

REFERENCES
4. 101 Famous Poems, p. 65.
CHAPTER 45

The Only Two Religions in the World

The Scriptures declare that out of the heart are the issues of life, and that as a man thinketh in his heart so is he. These are not only psychological truths and spiritual ones, but also physiological. Life is not just a matter of what happens to one, but what one does with what happens to one. This depends upon the habits of the mind. Only the heart that is immersed in the love of God and neighbor, and which has learned to trust the inscrutable actions of providence, can be fully healthy and happy. The only true religion enables us to find genuine happiness and avoid the psychological killers of worry, fear, and legalism.

* * *

One mustn't make the Christian life into a punctilious system of law, like the Jewish (for) two reasons (1) It raises scruples when we don't keep the routine (2) It raises presumption when we do. Nothing gives one a more spuriously good conscience than keeping rules, even if there has been a total absence of all real charity and faith.

C. S. Lewis, Letters to an American Lady, p. 38.

* * *

For I delivered to you as of first importance what I also received, that Christ died for our sins in accordance with the scriptures...

1 Corinthians 15:3 RSV.

* * *

Now do you see it? No one can ever be made right in God's sight by doing what the law commands. For the more we know of God's laws, the clearer it becomes that we aren't obeying them; his laws serve only to make us see that we are sinners. But now God has shown us a different way to heaven – not by "being good enough" and trying to keep his laws, but by a new way (though not new, really, for the Scriptures told about it long ago). Now God says he will accept and acquit us – declare us "not guilty" – if we trust Jesus Christ to take away our sins...

Romans 3:20-22 L.B.

* * *

Only Two

Despite all the divisions within Christianity and paganism, there are really only two religions in the world. Which is yours?

True and False Religion

From the time of Adam's sin, all false religion has sought to clothe its nakedness by its own works in order to meet the requirements of a holy God. But true religion comes to God as an empty-handed beggar, bringing only that which God himself has provided – the Lamb.

False religion has ever said: "Be holy and God will love you." On the other hand, those who have discovered true religion echo Scripture's words, "this man receives sinners" (Lk 15:2), God "justifies the ungodly" (Rom 4:5), and Christ "has gone in to be the guest of a man who is a sinner" (Lk 19:7).

While false religion makes the creature and his works central, true religion makes the Creator and his works central. Thus, we see the Jews coming to Christ and asking him, "What shall we do, that we might work the works of God?" Jesus responded, "This is the work of God, that ye believe on him whom he hath sent" (Jn 6:28-29). The Pharisees emphasized what they should do, but Christ put the emphasis on what God had already done in sending him, the Redeemer. Why was the cross needed if men could save themselves by their own works? False religion majors in law and minors in love. True religion majors in love and minors in law. The first majors in what God requires of us, and the other majors in what God has done for us. One religion puts all its stress on Christ our example, the other puts its stress on Christ our substitute. One is a religion that leads to bondage, despair, and death. The other is a religion that leads to joy, salvation, and life everlasting.

Saul, the Pharisee, belonged to the first religion, and as to righteousness under the law he was blameless (Php 3:6). But Paul, the apostle, belonged to the second religion and he wrote; "I through the law died to the law, that I might live to God" (Gal 2:19 RSV, see also Rom 7:4). Paul knew that law was the foundation, the pillar, and bulwark of the universe and as sacred as God himself. Nevertheless, he condemned law as a method of salvation, while using it as a standard. In Galatians 5:4 he wrote, "You are severed from Christ, you who would be justified by the law; you have fallen away from grace."

Law Can't Save

"Higher than the highest human thought can reach is God's ideal for his children." If no human thought can reach God's ideal, then what about our actions? Climbing up to heaven by Sinai is a risky business. One slip and we are done for. The law demands a perfect nature, perfect motives, perfect feelings, perfect thoughts, perfect words, perfect actions. It requires that every motive, feeling, thought, word, and act be the best possible at every moment of time. No wonder that when Paul looked into the Decalogue in the light of Calvary he said, "I died" (Rom 7:7-14).

To break the law once brings not only guilt, but also incapacity. Because of Adam's fall, from the very first moment of volitional living, we are guilty of selfishness, impurity, vanity, pride, and hatred. We have marred our soul and deserve death. The slightest sin is an infinite sin, for it is done against God who is an infinite being.
A religion of law always fails, because law cannot motivate or forgive. The New Testament again and again contrasts law and grace, works and faith. Paul says about salvation, "If it is by grace, it is no longer on the basis of works; otherwise grace would no longer be grace" (Rom 11:6).

Paul’s name heads fourteen epistles and every one of them is closed with a prayer for grace. Paul calls it "the free gift of God." Thousands have been kept out of the kingdom of God because they did not realize that salvation is a gift. Many today think they must do something to merit salvation. Paul says of his countrymen: "Israel who pursued the righteousness which is based on law did not succeed in fulfilling that law. Why? Because they did not pursue it through faith, but as if it were based on works ... being ignorant of the righteousness that comes from God, and seeking to establish their own, they did not submit to God's righteousness. For Christ is the end of the law, that every one who has faith may be justified" (Rom 9:31-32, 10:3-4).

The law says, "this do and you will live." But grace declares, "live and you will do." The law says, "pay me what you owe." But grace, "I frankly forgive you all." The law says, "the wages of sin is death." But grace, "the gift of God is eternal life." The law says, "the soul that sins will die." But grace, "whosoever believes has everlasting life." The law says, "make a new heart for yourself." But grace, "a new heart will give you." The law says, "cursed is everyone that does not continue to do all the things written in the law." But grace, "blessed is he whose sin is forgiven, whose transgression is covered." The law says, "you shall love the Lord your God with all your heart." But grace, "herein is love, not that we loved God; but that he loved us."

When the law was given at Mount Sinai, 3,000 people died in a matter of days. When the gospel was proclaimed at Pentecost, 3,000 people were given new life. Three thousand sermons on the law alone will not convert one person. One sermon on the gospel can convert 3,000! I am not downgrading the law, which is eternal, infinite, and holy. I am saying that law can never save. The law can only be truly obeyed when the heart is filled with the love of Jesus Christ in response to his love for us.

No one can obey God without loving God, and no one can love God unless convinced that God has first loved him. The thief on the cross had been through plenty of law but it hadn't helped him. When he saw Love Incarnate, he was saved eternally.

To run and work, the law commands, but gives me neither feet nor hands. But better news the gospel brings, it bids me fly and gives me wings!

An Ancient Problem

The Bible designates all false religions as "Babylon." God is ever calling his people out from Babylon. The Babel builders of old had a self-centered religion. "They said, 'Let us build ourselves a city, and a tower with its top in the heavens, and let us make a name for ourselves'" (Gn 11:4 RSV). It is interesting that no one today knows the name of one of the Babel builders! They went to all that effort to make a name for themselves and to make their own way to heaven, but failed miserably. Their type of religion brought heaven too low and made man too tall. All false religions use the wrong materials — mud and slime. Apart from God we are all mud and slime. Animated mud. All false religion depends on human efforts to reach heaven and to find an acceptable name.

On the other hand, Jacob is an example of true religion. He was a twister, that is what his name means. When his conscience smote him as God wrestled with him, he confessed that he was a rotter and a twister, a moral weakling, and then God gave him a new name. Earlier in a dream, Jacob saw a great ladder from heaven to earth, with angels of God ascending and descending. This was the opposite of the Tower of Babel. God made the connection. The connection was the ladder, and Christ is the ladder. God connected heaven and earth because man could never do it. Then Jacob said, "This is none other than the house of God, and this is the gate of heaven" (Gn 28:17). He found that God was nearer than he thought. True religion teaches that God is very near penitent sinners.

God’s Solution

Let us focus for a moment on how God solved the sin problem. We were ruined by our first representative (Adam), and we had nothing to do with that. The good news of the gospel is that we have been redeemed by our second representative (Jesus), and we had nothing to do with that either! Romans 5:10 says, "while we were enemies we were reconciled to God." 2 Corinthians 5:18-21 tells us how this happened: Christ was reckoned as being what he was not, that we might be reckoned as being what we are not.

On the cross, Christ represented every one of us. The frame was the parchment, the nails were the quill, and his blood was the ink. His crucified hands and feet, his pierced brow and side, tell the story of our life. He suffered because we used our hands and feet, mind and heart selfishly and sinfully. That naked body reminds us that we don't have a stitch of righteousness to offer God. Thus, the cross is the tree of the knowledge of good and evil, for it reveals our evil and God's goodness. Man was lost by partaking of the first tree of the knowledge in Eden. Satan said, "Take, eat" and man did so. Now Jesus says the same, as he stands by his cross, offering us the merits of his sacrificed life. We are saved in the same way as we were lost — by taking and eating.

The Atonement is not just one belief within a body of Christian doctrine. It is the lifeblood running through all biblical theology. Every important truth is presupposed by the Atonement, included in it, or arises from it. Every imperative to practice holiness flows out of Calvary.

The good news of the gospel is that our sins were crucified with Christ and nailed to his cross. Therefore, the law has no more power to condemn us as believers, than it has to condemn Christ. If we do not see our complete death in him, sin will reign in us. No sin can be crucified either in heart or behavior unless it has first been pardoned in conscience through the precious blood of Christ. When the guilt of sin is not removed, the power of sin cannot be subdued. Sin ceases to reign in us only after we have received the forgiveness of sin (Rom 6:14). The gospel announces that all men and women were justified at the cross. "Whosoever will" may accept it and be saved.

Jesus Bears the Sins of the World
Now we can understand those mysterious sections of the gospel narrative which tell us of the intensity of Christ's mental anguish when he sweat great drops of blood and later cried, "My God, my God, why have you forsaken me?" (Mt 27:46 NIV). It was not the fear of death that explains Christ's agony. It was the awareness that he was suffering for the sins of the human race. He was forsaken of God, or so it seemed, that we might not be. He cried, "Why?" in order that we might never need to utter that cry.

The lightning bolts of judgment struck the innocent Son of God in order that the guilty might find safety at the seared site of Calvary. It is no travesty of justice. The immutable law of God was more honored by the death of the infinite Son than if the whole guilty human race had perished. Furthermore, the person who receives the blood-bought gift of righteousness cannot remain the same. Looking to Christ justifies; gaz ing at Christ sanctifies. The amnesty given to the rebel dissolves the inner spirit of rebellion. Therefore, it is written: "Herein is our love made perfect, that we [guilty but accepted sinners] may have boldness in the day of judgment," for Christ himself has said, "He that heareth my word, and believeth on him that sent me, hath everlasting life, and shall not come into condemnation; but is passed from death unto life" (1 Jn 5:17; Jn 5:24).

The one who sees that Christ took his place on the cross is justified. The penitent sinner is declared righteous. "Justify" never means to make righteous (Dt 25:1; Ex 23:7). Down through the centuries false religion has made "justify" mean "make righteous," in the sense of becoming more righteous. One only has to read Luke 7:29 and 10:29 to see the falsehood of that soul-destroying error. Anyone can read the book of Romans in a modern translation and see the glorious truth that as soon as the sinner exercises faith in the atonement of the cross, he or she is declared righteous, perfect, and without condemnation. These blessings are retained as long as he or she believes, despite personal mistakes and failures. Note it well, justification does not cover only our past, but all our days.

The gospel is not good advice, nor good views. It is good news. What we could never do for ourselves, God has done. And now whosoever will may come, and whoever comes to Christ will never be cast out, for every kind of sin and blasphemy can be forgiven. This remains true throughout the believer's entire existence, not just at conversion. Justification is ongoing as long we keep trusting in the merits of Christ alone. While our state may change, our standing before God does not. For Christ's sake, we are ever viewed as perfect in God's sight. Though not perfect children, we are, by faith, perfectly his children.

I hear the words of love,
I gaze upon the blood,
I see the mighty sacrifice,
And I have peace with God.

**Total Salvation from Sin**

The plan of salvation contemplates our entire recovery from sin: from its guilt, its power and its presence. Justification, which is the imputing of the merits of Christ, removes the burden of guilt. Sanctification which comes through the gift of the Holy Spirit when we are justified, removes the power of sin and is a life-long work. Glorification, at the coming of the Lord, removes from us the very presence of sin as it takes away our sinful nature and changes this corruptible into incorruptible, and this mortal into immortal.

The justification that is imputed to us is a righteousness which is 100 percent, but it is not internal. It is an "alien" righteousness, that is, outside of us. It resides in Christ alone and is reckoned to us as a gift when we believe. It is reckoned to us just as sin was reckoned to Christ. The righteousness of sanctification, however, is internal. It is the fruit of our cooperation with the Holy Spirit. But it is not 100 percent. It is never complete in this life. Thus, we are ever dependent upon the merits of Christ, ever dependent upon justification for our standing with God. While we believe, the law can no more condemn us than it can condemn Christ, the Son of God.

Justification has to do with our status, but sanctification has to do with our state. We are meant to fix our vision on the first rather than the second, or we will be discouraged by our many failures. Our position is more important than our condition, though a good condition will always result from a good position. There is no such thing as justification without sanctification. The righteousness of glorification will be both 100 percent and inside us. This will occur at the coming of the Lord. We are saved by grace alone through faith alone, but the faith that saves is never really alone. We are not saved by faith plus works but by faith that works. Faith is not a doing but a seeing. It is also a hearing of the gospel which enables us to see God's love for us. Faith is not a doing word, but a receiving word. It means to rest upon Christ's merits for time and eternity. To be saved by faith means to be saved through faith, because of faith. For faith is but the hand of a blind, starving, naked beggar accepting Christ's gift of clothing and bread.

I would not work my soul to save,
For that the Lord has done,
But I would work like any slave,
For love of God's dear Son.

**SUMMARY**

All false religion says: "If we are good, God will love us." But true religion says: "Though we are not good, God loves us." In other words, false religion practices holiness in order to find union with God, but true religion through faith's union with God finds holiness.

False religion majors in law and minors in love. With true religion, it is the reverse.
Law cannot "work" anything. It cannot forgive or motivate. It was perfect for perfect people – Adam and Eve before the Fall. Like Moses, it leads us from Goshen into the wilderness up to the impossible river barring the way to the Promised Land. Only Joshua (Jesus) can take us over and through!

Grace (the active love of God that gives and forgives) is the great theme of the New Testament. It is seen best in the substitutionary death of Christ.

Christ was treated as a sinner though he was perfect. The believer is treated as perfect though he or she is a sinner.
CHAPTER 46
The Unsuspected Truth About the Best of Health

Our pride and excessive self-concern are responsible for much of our sickness. The Christian way of humility and love is also the way of health.

* * *

...our attitude of mind is a most important factor in determining whether we shall suffer from exposure to life's daily stress. Our tendency in the past has been to blame our diseases on the people around us instead of blaming our troubles on our faulty reactions to those people. The sorrows and insults of daily living need not cause much trouble if we take them with the right mental attitude. Chronic brooding over sorrows and insults indicates faulty adaptation, which can cause any condition from itching feet to insanity. The most common form of faulty reaction is self-pity.

S. I. McMillen, M.D., None of These Diseases, p. 108.

...in contrast to immunization, the behaviours required in the prevention of many chronic diseases, and certainly of heart disease, require considerable discomfort and sacrifice. Only the smoker who has tried to give up cigarettes can appreciate the difficulties and even suffering involved. Eating and sedentary living habits also are deeply anchored and often extremely difficult to modify.

In studying people's daily lives, one is struck by both the regularity of daily life and the interdependence of the various habits that create this regularity. Virtually all people's lives consist largely of a series of recurrent and almost ritualistic routines...this reliance on learned and constantly reinforced habitual response patterns gives order to an individual's life and endows him with a measure of psychological security that would be threatened by any substantial changes forced upon him.

...The power of deeply ingrained, long-established habits and their anchorage in a whole network of other habits render them very resistant to change, even when the person actively attempts to change them.

In short, preventive behavior against chronic disease demands far more intensive and comprehensive changes in a man's life than preventive behavior against most communicable diseases, and may require substantial sacrifices of convenience, comfort, and security, and even tolerance of considerable mental and physical pain. The period of adjustment to new habits extends over months, years, or even a lifetime instead of the half hour needed to be immunized.

Prevention of Heart Attack, Department of Physiology, The Medical College of Wisconsin, edited by George A. Hellmuth, M.D., pp. 89-90.

* * *

Truth Comes in Disguise

Christ, the Truth, was despised and rejected of men. God always comes to humanity, this side of Judgment Day, incognito. Thus it was at Bethlehem and Calvary. "Him they knew not." "He came unto his own and his own received him not." In the great Judgment Day the damning truth that will dawn upon the lost is that God continually came to them in the person of the sick, the suffering, the hungry, the imprisoned, and the poor; and “inasmuch as ye did it [love] not unto them, ye did it not unto me – God.”

So it is not surprising that the most vital truths even about health should also be despised and rejected of men. The best treasure is never where people look for it. John Bunyan, in The Pilgrim's Progress, pictured a man with a muckrake intent upon his garbage all unaware that an angel stood over his head offering him a crown. It is always like that.

Sickness like sin has many roots, but unlike sin the root cause need not lie within ourselves. In an imperfect world we all function with an imperfect heredity and develop and wither in an imperfect environment. It should never be forgotten that many of God's greatest saints have suffered terribly from ill-health through no fault of their own. But far more often sickness is our own fault. The curse causeless does not come for most of us. We reap what we sow even when we sow in ignorance.

This is particularly true of many who reject the gospel. In rejecting Christ people reject his way of life, not knowing that they reject happiness and health. For if all other things are equal, the tragic cause of unhappiness for the majority is their rejection of not only Christ, the Truth, but Christ the Way and the Life – the abundant Life.

We should have learned this from the introduction to Christ's Sermon on the Mount. There Christ spoke about happiness and health. When he said, "Blessed are the peacemakers" his Jewish listeners knew that blessedness meant happiness, and that peace meant wholeness and health – the abolition of all discord.

What a paradox we have in the Beatitudes! Those who are poor, mourning, meek, hungry, and persecuted are the ultimately happy ones! How can it be? How can Christ declare blessed those who are treated by the world as the offscouring of all things?

Health, Like Happiness, Is a By-Product

The best philosophers, psychiatrists, and sociologists could tell us. Happiness, like coke (not the drink but the fuel made from coal), is a by-product; and so is health. We do not find happiness when focusing upon it. And the truly healthy person is not a valetudinarian, a hypochondriac, but someone outgoing whose main thoughts are never riveted upon him or her self.

Helmut Thielicke reminds us:

A good part of our discouragement stems from our constant preoccupation with ourselves. We take ourselves so awfully seriously. And when we do that, everything in life goes haywire. Our worries blow themselves up into immense
bugaboos; our little self-conceits play a disproportionate role, and if they are disappointed they never stop gnawing at us. "We build castles in the air and drift further from our goal." Most of our miseries arise, not because we find ourselves in an objectively miserable situation, but because we define both misery and joy in a false way – with reference to ourselves. Most of our neuroses too derive from this same self-centeredness.¹

Self-centeredness is not only the root of sin but also of suffering and, in many cases, sickness. Think of that glorious medieval prayer which never grows old:

Lord,
make me an instrument of Your peace.
Where there is hatred let me sow love;
Where there is injury, pardon;
Where there is doubt, faith;
Where there is despair, hope;
Where there is darkness, light; and
Where there is sadness, joy.
O divine Master,
grant that I may not so much
Seek to be consoled as to console;
To be understood as to understand;
To be loved as to love;
For it is in giving that we receive;
It is in pardoning that we are pardoned; and
It is in dying that we are born to eternal life.²

This prayer echoes the spirit of the Beatitudes. It is splendid theology. But it is also good medicine. The outgoing soul who seeks to console rather than to be consoled, to love rather than to be loved, to give rather than to receive – that soul has health of soul, and also with it health of body. Not as it were by accident, but by consequence.

The saints of all ages have known this secret. It is found not only in the Old and New Testaments, but in the writings of Catholic and Protestant saints. You will find it in Fenelon, Madam Guyon, Thomas A’ Kempis, Luther, Calvin, and Wesley. Consider the following words from that imprisoned witness for Christ whose letters have illuminated not only his cell but innumerable hearts over the centuries.

I think that this world, at its prime and perfection, when it is come to the top of its excellency and to the bloom, might be bought with a halfpenny; and that it would scarce weigh the worth of a drink of water. There is nothing better than to esteem it our crucified idol (that is, dead and slain), as Paul did. Then let pleasures be crucified, and court and honor be crucified. And since the apostle saith that the world is crucified to him, we may put this world to the hanged man’s doom, and to the gallows: and who will give much for a hanged man? As little should we give for a hanged and crucified world. Yet fools are pulling it off the gallows and contending for it.³

As Dr. Jowett wrote long ago:

There is a nervous disease known to the physician as chorea, "the patient sometimes turns around and continues to spin slowly on one spot." Egotism is just an incessant spinning on one spot. Sometimes we spin slowly round about our own particular talent. An ailment is apt to make us think ourselves interesting to other people, and we move as the craving absorbents of the world's sympathy. Incessant self-regard imprisons a life in the wintriest impoverishment. If I would attain unto a life that is bright, genial, fruitful and interesting, I must cease to spin upon a point and move in wider fields. I must be born into my brother's world, and stand at his point of view, and contemplate the landscape of life from his window.⁴

History tells of Mahmud of Ghazni who conquered much of India, destroying the idols of every city which he took. Ultimately he laid siege to the great city, Gujarat, which contained a costly Brahman shrine wherein was a gigantic idol fifteen feet tall. The devotees of the temple knelt before the invader and begged him to spare the idol on which, according to them, the good fortunes of the city depended (until that point). But Mahmud struck the image with his ax, and the idol broke apart, showering thousands of precious gems before the feet of the conqueror.

When the Box of Selfishness Is Broken, Then the Fragrance Flows

There we have an image of the truth – that it is the idol of self which pretends to guarantee us happiness – but in vain. For years it intrigues to escape the death demanded by the gospel. Till self lies shattered before God, the riches he wishes to bestow are restrained. When the alabaster box is broken, then the ointment fills the house with its fragrance. For there to be wine, the grapes must be crushed. Until the seed of self falls into the ground and dies, it abides alone without fruit. But once it submits to burial, it is born again purified and yields a bountiful harvest.

Luther so believed. On one occasion he affirmed that it is our love of self which is the root of all our disquietude. How much pain is averted by the graces of humility and meekness! When proud self is all alive clamoring for recognition and preeminence, no wonder it is often hurt by a world containing 5 billion other selves all seeking the same position of priority.
Read the biographies of every age. They are replete with illustrations of how emotional upsets—due to wounded pride, disappointed hopes, and unrecognized superiority—are frequently followed by illness. "Out of the heart are the issues of life."

Many specialists of modern medicine trace 70-90 percent of illnesses to emotional upsets. One such specialist, confronted by a woman complaining of sleeplessness, headaches, spots before the eyes, irritability, and nervousness, reasoned that some event had triggered the misbehavior of this woman's nervous system. The woman had high blood pressure, and examination revealed a small goiter. Upon inquiry, the doctor discovered that the woman was overwhelmed with anxiety about her husband's infidelity. The anxiety stimulated her thyroid gland to overfunction, thus causing the goiter, and the high blood pressure. A less skillful physician would have operated on the thyroid and left her as ill, or worse, than before. But a better way was found: reconciliation between husband and wife. When this was accomplished, so was the curing of the wife's physical symptoms.

One of the major causes of rejection for military service in WWII was dyspepsia (indigestion). It is well known that dyspepsia is frequently of emotional origin. For example, the stresses of military life often created this malady for soldiers who had never known it before. In military hospitals there were 15-20 percent of all patients suffering from dyspepsia which was purely functional in nature and not organic. When Dr. Alexander Rush studied 200 cases of dyspepsia among military personnel in the South Pacific during WWII, he found that in every one of the 106 cases who showed no signs of organic disease, there had been the experience of prior acute or chronic emotional tension.

The meekness of which Christ spoke in the Beatitudes is the opposite of proud flesh. Meekness makes no demands in the material realm. It lays no claim to human recognition. Consequently, it is not hurt when passed by or unfairly treated. Of course, the temptation to be hurt will be present, but the indwelling Spirit of Christ will not permit that inclination to dominate the soul. But the individual who believes the world owes him or her happiness is easily hurt—most often—by the lack of it.

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Next to the example of our Lord, that of Paul has most to teach us. Consider the philosophy of the man, implied in the following passages, who suffered more from a hateful world in a few years than most of us do in a lifetime:

To keep me from becoming conceited because of these surpassingly great revelations, there was given me a thorn in my flesh, a messenger of Satan, to torment me. Three times I pleaded with the Lord to take it away from me. But he said to me, "My grace is sufficient for you, for my power is made perfect in weakness." Therefore I will boast all the more gladly about my weaknesses, so that Christ's power may rest on me. That is why, for Christ's sake, I delight in weaknesses, in insults, in hardships, in persecutions, in difficulties. For when I am weak, then I am strong. (2 Cor 12:7-10, NIV)

Therefore we do not lose heart. Though outwardly we are wasting away, yet inwardly we are being renewed day by day. For our light and momentary troubles are achieving for us an eternal glory that far outweighs them all. So we fix our eyes not on what is seen, but on what is unseen. For what is seen is temporary, but what is unseen is eternal. (2 Cor 4:16-18, NIV)

We put no stumbling block in anyone's path, so that our ministry will not be discredited. Rather, as servants of God we commend ourselves in every way: in great endurance; in troubles, hardships and distresses; in beatings, imprisonments and riots; in hard work, sleepless nights and hunger; in purity, understanding, patience and kindness; in the Holy Spirit and sincere love; in truthful speech and in the power of God; with weapons of righteousness in the right hand and in the left; through glory and dishonor, bad report and good report; genuine, yet regarded as imposters; known, yet regarded as unknown; dying, and yet we live on; beaten, and yet not killed; sorrowful, yet always rejoicing; poor, yet making many rich; having nothing, yet possessing everything. (2 Cor 6:3-10, NIV)

Compare with these, Paul's triumphant vistas of 1 Corinthians 13, and Romans 8:28-39.

A wise priest many centuries ago sent a letter to a sufferer in his flock. It has blessed untold thousands since. Here it is:

The gloom of the world is but a shadow. Behind it, yet within our reach, is joy. There is radiance and glory in the darkness, could we but see; and to see, we have only to look. I beseech you to look.

Life is so generous a giver; but we, judging its gifts by their covering, cast them away as ugly or heavy or hard. Remove the covering, and you will find beneath it a living splendor woven of love, by wisdom, with power. Welcome it, grasp it, and you touch the angel's hand that brings it to you. Everything we call a trial, a sorrow, or a duty: believe me, that angel's hand is there; the gift is there, and the wonder of the over-shadowing Presence.
Life is so full of meaning and of purpose, so full of beauty – beneath its covering – that you will find that earth but cloaks your heaven. Courage then to claim it; that is all! But courage you have; and the knowledge that we are pilgrims together, wending through unknown country, home.

And so I greet you; with the prayer that for you, now and for ever, the day breaks and the shadows flee away.\(^5\)

One poet enshrined the insight we strive to set forth in this chapter:

> Self is the only prison that can ever bind a soul;  
> Christ is the only Angel that can the gates unroll.  
> And when He comes to set thee free, arise and follow fast.  
> His way may lie through darkness but it leads to light at last.

How vital it is to see that Christ is calling us not to self-sacrifice just for the sake of sacrifice. It is the very condition of joy, blessing, and fruitfulness. Consider that he plainly tells us that all is a matter of exchange, not of loss. "What shall a man give in exchange for his soul?"

Henry Drummond caught the vision and wrote:

> In many ways the limitation of the natural life is the necessary condition of the full enjoyment of the spiritual life.  
> In this principle lies the true philosophy of self-denial. No man is called to a life of self-denial for its own sake. It is in order to a compensation which, though sometimes difficult to see, is always real and always proportionate. No truth, perhaps, in practical religion is more lost sight of. We cherish somehow a lingering rebellion against the doctrine of self-denial – as if our nature, or our circumstances, or our conscience, dealt with us severely in loading us with the daily cross. But is it not plain after all that the life of self-denial is the more abundant life – more abundant just in proportion to the ampler crucifixion of the narrower life? Is it not a clear case of exchange – an exchange however where the advantage is entirely on our side? We give up a correspondence in which there is a little life to enjoy a correspondence in which there is an abundant life. What though we sacrifice a hundred such correspondences? We make but the more room for the great one that is left.

The lesson of self-denial, that is to say of Limitation, is concentration. Do not spoil your life, it says, at the outset with unworthy and impoverishing correspondences; and if it is growing truly rich and abundant, be very jealous of ever diluting its high eternal quality with anything of earth. To concentrate upon a few great correspondences, to oppose to the death the perpetual petty larceny of our life by trifles – these are the conditions for the highest and happiest life. It is only Limitation which can secure the Illimitable.\(^6\)

Those that see the truth of such words come to realize that the main point in human experience is not the pressure to which a person might be subjected, but where that pressure pushes the person – toward God or away from God. Suffering can either sour or sanctify. It can make us bitter or better. Pearls are made from irritations. C.S. Lewis was correct when he said that the most damaging situation for any of us was one of apparent security. Only when we are weak are we strong.

God's design is that we should learn by faith to even welcome the upsets and rebuffs of life as instruments which chisel away our worldliness and conform us to the likeness of Christ. What an advantage in life's battle if even when things are at their worst, we also learn to look on the blessings remaining, and the God who ever brings good out of evil! Our mental focus determines whether our bodies rebel, or abide stable.

The Christian philosophy is not one that can be achieved by mental effort. It is God's gift as we look continually to Christ. When we take Mary's place at his feet daily, and contemplate ever his cross and resurrection, then the soul is energized by the divine Spirit. Then we can trample down life's irritations. Romans 6:14 assures us that freedom over evil accompanies the awareness of God's grace. "Sin shall not have dominion over you, for you are not under law but under grace." When we see Christ in his goodness and love, our hearts will ever cry: "Provided I have him, I don't care what happens." In response to any temptation, however strong, we will be enabled to say, "I'd rather have Jesus than that."

> What has stripped the seeming beauty  
> From these idols of the earth?  
> Not the sense of right, or duty,  
> But the sight of nobler worth.  
> Not the crushing of those idols,  
> With its bitter pain and smart,  
> But the beaming of His beauty,  
> The unveiling of His heart.  
> 'Tis the look that melted Peter,  
> 'Tis the face that Stephen saw,  
> 'Tis the heart that wept with Mary  
> Can alone from idols draw.  
> Draw, and win, and fill completely,  
> Till the cup overflow the brim;  
> What have we to do with idols  
> Who have companied with Him?\(^7\)

**The Cross Is Now and Is Lifelong**

Bishop Fulton Sheen was a wise preacher. He knew human nature very well indeed. As with most great Christian counselors he often spoke of the necessity of not permitting feelings or passions to govern life. Rather, a will surrendered to Christ is to
rule. Consider Sheen's words that are so pertinent to all who, having seen the glory of Christ, resolve to bring all things within themselves into subjection to him:

Everyone has a war going on inside himself, whether he be saint or sinner; everyone is fighting for an order of values, destroying some things for the sake of other things. Both the normal and the abnormal are engaged in a civil war. But the difference is this: the normal person is at war with his lower instincts, in order to give expression to the higher self of reason, free will, and response to grace. The abnormal person is at war with his higher self: reason, free will, and the response to grace, in order to give unlicensed expression to sex, to ego, or to avarice, perhaps under the name of security.

It is meaningless to talk of repression being wrong and self-expression being right, because there is never a repression without an expression, nor an expression without a repression.

Once the instincts and passions are subject to the will, they can be controlled and guided. Morality does not repress passions and appetites when it restrains their unlawful expression. For instance, it does not deny the emotion of hunger; it only asks that, when a man sits at table, he shall not eat like a pig. Our Lord did not repress the intense emotional zeal of Paul; He merely redirected it from hate to love. Our Lord did not repress the biological vitalities of a Magdalene; He merely turned her passion from love of vice to love of virtue. Such a conversion of energies explains why the greatest sinners – like Augustine – sometimes make the greatest saints; it is not because they have been sinners that they love God with their special intensity, but because they have strong urges, violent passions, flowing emotions which, turned to holy purposes, can do as much good as they formerly did harm. Self-discipline is only a means, the end of which is a greater love of God. Any form of asceticism which disrupts charity is wrong; this was the mistake of the monk who decided to live only on crusts and upset the whole monastery, by making all the monks hunt for crust to satisfy his desire for mortification. Asceticism that makes us less agreeable to our neighbors does not please God.

To see the will of God as our ally and friend, to recognize human selfishness and pride as the great enemy, to acknowledge that cross of Christ as our supreme motivation, is to find health of soul. And God, the great Giver, often links with soul health the health of body.

As Dr. Alexander Maclaren wrote:

Self-renunciation guards the way to the "tree of life." The world's cries today are two – "Get!" "Enjoy!" Christ's command is, "Renounce!" and in renouncing we shall realize both of these other aims, which they who pursue them only, never attain.

An anonymous poet summarizes the science of Christian living:

For all through life I see a cross,
Where sons of God yield up their breath;
There is no gain except by loss,
There is no life except by death;
There is no vision but by faith,
No glory but in bearing shame,
No justice but in taking blame;
And that Eternal Passion saith
Be emptied of glory and right and name.

Anon.

SUMMARY

Christ who was the Truth was despised and rejected. This is the experience of most forms of truth.

When people reject the gospel they reject happiness and health.

The paradox of the gospel is that he who loves his life will lose it, but that he who loses his life for Christ's sake and the gospel's will find it.

Happiness is a by-product and is never found by seeking it.

One of the very worst foes to our happiness is our self-centeredness.

The saints of all ages have taught that happiness comes as we seek to foster the happiness of others.

It is excessive self-love which is the root of almost all our disquietude.

Emotional upsets due to wounded pride and disappointed hopes are frequently followed by illness.

Emotions that are out-of-hand pave the way for a variety of diseases if habitually experienced.

God does not ask us to sacrifice anything that's worth keeping. He calls upon us to exchange the inferior for the superior.

Only control of the instincts and passions by a will which itself is guided by the principle of love can lead to happiness and health.

REFERENCES

2. Attributed to Francis of Assisi.
4. J. Gregory Mantle, *Beyond Humiliation*, p. 44.
5. David Francis, *Treasures of Darkness*, p. 64.
**CHAPTER 47**

Secrets of Health and Happiness (Part One)

The happy have a much better chance of being healthy. But the only real way to happiness is through faith in Christ's abiding love for us, whatever our weaknesses, whatever our failures. A life without the infinite love of God, a life without meaning, invites disease.

* * *

... even though diseases have specific effects upon organs of the body, the backgrounds of many illnesses can be traced to unfortunate situations in the realm of personality.

Doctors now realize that the purely mechanistic approach to disease is entirely inadequate. The older mechanistic approach considered the patient as a group of organs, anyone of which might be the focus of some mischievous disease. The present-day approach to the problems of disease takes full advantage of all the scientific data and, in addition, recognizes that each organ is a part of a highly integrated human being. It recognizes that anything which disturbs the individual in his adjustment to his environment may cause the organs to function abnormally and thus be involved in a disease process.

Harold Shryock, M.D., *Happiness and Health*, pp. 5-6.

* * *

The Twins

Happiness and health usually go together. A miserable person is rarely healthy. Furthermore, a person being eaten up by guilt is rarely happy or healthy. Thus, the importance of our topic. What are the secrets of happiness?

Generations ago children were raised on porridge and the Bible, but today children are raised on cornflakes and comic strips. No wonder the world is so miserable, so tragically unhappy, so filled with sorrow, tears, and death.

Some years before he contracted AIDS, Rock Hudson complained, "I've spent so much time trying to figure out what life is all about, I still don't know, but now I don't care." Errol Flynn made a similar complaint. He had a question mark sewn inside his jacket. Like Hudson, he gave up trying to find the answer and he died at the end of his forties.

Where the Bible is not known, loved, cherished, and obeyed, there can be no lasting health and happiness. When a person sees that, he will cry out to God for help to understand his Book, for wisdom as he studies it, for love to respond to it. There can be no real joy, no fullness of health without the truths that Holy Writ contains. A generation raised on cornflakes and comic strips is a generation that lives without hope. And with the death of hope, comes the hope for death. That's why teenage suicide has quadrupled in the last fifteen years. That's why one out of every two marriages ends in divorce. That's why the promiscuous life-style of the sixties and the seventies has led to the most deadly disease ever known to mankind. Without the revelation of God in Holy Writ, life has no meaning. When we understand that, we'll study that Book as never before.

Is the world a bubble or an egg? A bubble is empty, but an egg has infinite possibilities. Is life an iceberg or a ship? Does it lack direction like the iceberg? Or does it have a captain and a compass like the ship? Is the world a mill rolling around forever grinding out life, death, good and ill, without purpose, or heart, or mind, or will? Is life a tale told by an idiot, full of sound and fury and signifying nothing? Is life just a dusty scuffle across a parched terrain? Is life the penalty for the crime of being born? Is it a disease for which the only remedy is death? Is life a narrow vale between the peaks of two eternities?

For the first time in history, man who asks the riddles, has become a riddle to himself. He not only doesn't know who he is, but he knows he doesn't know. He's lost his way. He's lost his address. He's like the little dog that lost its name tag while traveling by train. The stationmaster put on a new one which read: Here is nobody, from no place, going nowhere. That's true of people today.

Is not that "something" an apt summary of the twentieth century? a century wherein the most well-known of philosophers have declared that the only question worth attention is, "Why shouldn't all men everywhere suicide?" If all we can say about existence is that it's the fruit of time, matter and chance, if that's the explanation behind your existence and mine, behind human love and human values, then we can never say that anything is wrong or that anything is right. We cannot say that cruelty is wrong or prejudice is wrong or racism or murder or adultery -- everything's permitted! And this is why multitudes are freaked-out on drugs, illicit sex, trying to live by titillation of the senses, in a mad rush for pleasure, because meaning has disappeared and men and women dare not stop to think.

**Clues to the Meaning of Life**
But there are clues to help us find the meaning of existence. Even before we come to Holy Writ, which we must study and study closely, there are clues. We can judge man by the universe or judge the universe by man. Why the infinite difference between man and all other creatures? Why can man alone speak, worship, and laugh? Why is man alone bored? Whence come his ideals? Why his infinite capacity for God? Where does his shame come from? Why does he make excuses? Why doesn't man copulate in the street like a dog? Man is a demi god who towers over the rest of creation, and instead of judging the cosmos by time and chance, let's judge it by man. But which man?

Twenty centuries ago, a Roman governor asked, "What is truth?" (Jn 18:38). And a little later he answered his own question without intending to -- "Behold, the man" (Jn 19:5). We too must answer the riddle of life. Man is the answer, but which man? Christ -- behold, the man!

After twenty centuries we can find no defect in Jesus Christ. After twenty centuries we can suggest no addition. He is the only man who has claimed to be God, who was yet thought sane by his contemporaries. Good men never claimed to be God, neither Confucius nor Muhammad, nor other founders of the world's great faiths. Only Christ. His breathtaking claims were uttered with simplicity, and without vanity or ambition, and they are self-authenticating. And he says to us, today, making the universe his father's house, "Come unto me, all ye that labor and are heavy laden and I will give you rest." "I am the way, the truth, and the life." "I am come that you might have life and that you might have it more abundantly." "Fear not, little flock, it's your father's good pleasure to give you the kingdom." "Whosoever will may come and he that cometh to me, I'll in no way cast out."

There we have the meaning of life. We live in a world where more people kill themselves than kill others. There are two million people in this country who have made an attempt at self-execution. About 10 percent will try again, and many will succeed. What a world! A world where men and women choose death rather than the enigma of life.

Suppose you were assured that there was one question you could ask the universe and get the right answer. What would you ask? Would you not inquire, "Is the universe friendly?" Nature can't answer it; the human heart can't answer it; experience alone cannot answer it; neither science, nor education. The answer is found in the Good Man who visited our planet twenty centuries ago. The answer is found in his Book, that Book which we call the Bible, and nowhere else. We have pointed out that after twenty centuries men have to confess they cannot find a defect in Christ, neither can they suggest any addition that should be made to him. He is the only man who has ever claimed to be God and yet was considered sane by the wisest of his contemporaries. The most natural explanation for him is the supernatural. If he was good, he was God. "Which of you convinces me of sin?" he could ask. And none could point out a blemish, neither then nor now.

There can be no lasting health and happiness until we find that Christ is the meaning of life. Paul said, "For to me to live is Christ" (Phl 1:21). "I am the life," said Christ. Think of him. He makes life a unity just as he makes the Bible a unity. All the prophets, priests, and kings in the Bible pointed to Jesus. The prophets that spoke for God to men. The priests that interceded before God for men. The kings who ruled for God over men. They all pointed to Jesus. Remember he said, "A greater than Jonah is here." He's greater than the prophets. He said, "I'm greater than the temple." He transcends the temple and its priesthood. He said, "A greater than Solomon is here." He's greater than the wisest and richest of Israel's kings.

All the great characters of the Old Testament who reflected the goodness of God pointed to Jesus Christ. Adam, who fell asleep and had his side opened that he might have a bride, pointed to the second Adam, the very image of God, who came and had his side opened on Calvary that he might have his bride, the Christian church. Abel, the good shepherd, who was murdered because his works were righteous while his brother's works were evil, points to Christ, the good shepherd. Noah, who prepared an ark to the saving of his house, who only was righteous in his generation, whose family was saved because of him, points to the true Noah. Noah means rest. Christ is the man of rest. "Come unto me," he says, "and I will give you rest." All the great characters of Scripture point to him. He makes the Bible a unity, and life as well.

The temple in its sacrifices pointed to him. The manna in the wilderness that came down in the night with the dew and was round, and white, and sweet, and nutritious, symbolized Christ, the bread of life. The rock that was smitten by the rod, pointed to Christ who was smitten on the cross by the wrath of God because of the violated law. The water that flowed from the rock represented the blessings of the Spirit that Christ gives. The ladder Jacob saw that connected heaven and earth was an emblem of the One who unites the sinless and the sinful, God and man. The serpent on the uplifted banner staff to which the bitten Israelites looked for healing, typified Christ. Christ makes the Bible a marvelous unity, and he alone can make life a unity.

It was Paul who said, "I determined not to know anything among you, save Jesus Christ, and him crucified" (1 Cor 2:2). He wasn't crucified on an altar between two candles. He was crucified on a gory hill where skulls abounded, between two thieves, but his cross explains the meaning of life, and we can never have lasting health or happiness unless we grasp that meaning. The cross had a perpendicular cross beam and a horizontal stake and that's a paradigm of life. We have a relationship to God and a relationship to the world. On that cross, Christ exhibited faith, love, and hope, and these are the great motive powers of the soul; and without them no man can live in fullness of life.

See him there on the cross. They've stripped him, they've beaten him, they've crucified him, they're jeering, and he cries out, "Father, forgive them." As soon as the blood was shed, he interceded, himself the sacrifice, himself the priest. "Father, forgive them, for they know not what they do."

**The Cross Is the Pattern for Living**

How shall we handle life? With the sort of love Jesus demonstrated on the cross! His first and last words on the cross begin with Father. "Father, forgive them," "Father, into thine hands I commit my life." You and I can accept life and its crosses only if we know God as our Father. Moses endured as seeing him who is invisible. That's the way Christ endured. That's the way you and I are to endure.

Remember Hagar in the book of Genesis? God was revealed to her at the fountain and she called that fountain, "Thou God seest me" (Gn 16:13). To know that God is there, that he sees, that he loves, that he cares, is to know that he provides and
that he is sufficient. See Christ wooing the penitent thief and promising him Paradise – not putting him on probation, not warning him, not giving him a lot of good advice, but telling him that Paradise is his. What love! You and I are that penitent thief. He says it to us. If we come as the thief came, “Lord, remember me,” he’ll say, “Verily I say unto you today, you’ll be with me in paradise.”

When the greatest of the twentieth-century theologians, Karl Barth, came to this country, they asked him at Harvard, “What's the greatest thought that has ever crossed your mind?” He replied, “Jesus loves me this I know, for the Bible tells me so.” That's the greatest thought that can cross anybody's mind. "God is love" says Scripture. Samuel Rutherford said, “Ah, what a house is that to dwell in. God is love.” “he that dwelleth in love, dwelleth in God, and God in him,” (1 Jn 4:16).

Could we with ink the ocean fill,  
And were the skies of parchment made,  
Were every stalk on earth a quill,  
And every man a scribe by trade  
To write the love of God above,  
Would drain the ocean dry,  
Nor could the scroll contain the whole,  
Though stretched from sky to sky.

– F.M. Lehman

The cross of Christ reveals the meaning of life. All life is a crucifixion – limitation, pain, sorrow, disappointment, scorn, rebuke, and yet overshadowing all, faith, hope, love. The cross is the secret. That's why Paul said, "the cross ... is the power of God" (1 Cor 1:18). It is the wisdom of God, and the power of God. Real life can be ours as we embrace Christ's cross. As we apply it to the duties and the sorrows of today, we may live expectantly, triumphantly.

SUMMARY

Once children were raised on porridge and the Bible, but now it is on cornflakes and comic strips that they "mature."

Only where the truths of Scripture are known, loved, cherished, and obeyed can there be lasting health and happiness.

The death of hope leads to the hope for death. A person can put up with almost any what if he has a why. If there's a zero at the end, everything along the way is a zero. Life has no meaning or value to the unbeliever.

For the first time in history man who asks the riddles has become a riddle to himself. We remember Pilate for two statements: "What is truth?" "Behold the man." The second answers the first.

Christ is the meaning of life. His cross tells us how to live.
CHAPTER 47
Secrets of Health and Happiness (Part Two)

Forgiveness often is the gate beautiful to the temple of health. It motivates us to choose God's way at every step of our pilgrimage and we do it "for joy thereof" (Matthew 13:44).

* * * *

Christianity is about Jesus, "the Way, the Truth, and the Life." It is about the only way life will work – all other ways fail and bring pain.

* * * *

Forgiveness Is the Key

We have pointed out that generations ago children were raised on porridge and the Bible, but today they're raised on cornflakes and comic strips, and that's why it is that in our world more people kill themselves than kill others. That's why half of all marriages now end in divorce. That's why suicide has multiplied fourfold in the last fifteen years among teenagers. Life has lost its meaning. Human beings are poor grovelers between faith and doubt. They don't know what to think, what to believe, what to do, what to love. We have pointed out that the only answer to life's riddle is the Christ of Scripture. And if people realized that, they would see that lasting health and happiness can be theirs only as they study the Scriptures, seriously, earnestly, for life, eternal life!

I want to emphasize that unless we accept the gift of forgiveness that's offered in Scripture, we cannot have lasting health and happiness. Consider the story in Matthew 9:1-2:

And he entered into a ship, and passed over, and came into his own city. And, behold, they brought to him a man sick of the palsy, lying on a bed: and Jesus seeing their faith said unto the sick of the palsy; "Son, be of good cheer, thy sins be forgiven thee."

Here was a man who was sick, and it was his guilt that had made him sick. That is not true of every sick person. Some of God's greatest saints have endured more sickness than all the rest of us. The great Reformers had their share of sickness. Calvin had every disease in the book! Luther, too, was troubled by recurring maladies. It's always wrong to say that all disease is a result of that individual's sin, but it is true that in many cases people are diseased, are sick, because of their guilt. And it's true for all of us, that we cannot have lasting health and lasting happiness, unless we accept the forgiveness of Christ. "Son, daughter, be of good cheer, thy sins be forgiven thee." These are the words of Jesus to you today if you'll believe it. It doesn't matter what your sins are. You may say my sins are too great. My friend, you have a great Savior. He's not a painted Savior, he's a real Savior. He saves from the uttermost, no, he saves from the guttermost to the uttermost. Note what Jesus said to Peter in Matthew 18:21, 22:

Then came Peter to him, and said, "Lord, how oft shall my brother sin against me, and I forgive him? til seven times?" Jesus saith unto him, "I say not unto thee Until seven times; but, Until seventy times seven."

Scripture lays on us the duty of forgiving seventy times seven, and will not God, who urges upon us that duty, do likewise? Is not this passage saying that we have such a God who is infinite in mercy as well as infinite in wisdom? Infinite in his forgiving power as in his creating power? It's saying just that. How do we know? Listen to the story that follows:

Therefore, is the kingdom of heaven liken unto a certain king which would take account of his servants. And when he had begun to reckon, one was brought unto him which owed him ten thousand talents. But forasmuch as he had not to pay, his lord commanded him to be sold, and his wife, and children, and all that he had, and payment to be made. The servant, therefore, fell down, and worshipped him, saying, "Lord, have patience with me and I will pay thee all." Then the lord of that servant was moved with compassion, and loosed him, and forgave him the debt. But the same servant went out, and found one of his fellow-servants which owed him an hundred pence; and he laid hands on him, and took him by the throat, saying, "Pay me that thou owest." And his fellow-servant fell down at his feet, and besought him, saying, "Have patience with me and I will pay thee all." And he would not; but went and cast him into prison, till he should pay the debt. So when his fellow-servants saw what was done, they were very sorry, and came and told unto their lord all that was done. Then his lord, after that he had called him, said unto him, "Oh thou wicked servant, I forgave thee all that debt, because thou desiredst me. Shouldest not thou also have had compassion on thy fellow-servant, even as I had pity on thee?" And his lord was wroth, and delivered him to the tormentors, till he should pay all that was due unto him. So likewise shall my heavenly Father do also unto you, if ye from your hearts forgive not everyone his brother their trespasses. Matthew 18:23-35

The Marvel of God's Infinite Mercy

Note that God requires us to be like him. When he tells Peter to forgive his brother seventy times seven, it's because he does that to us. At the beginning of the story we witness a man who owed ten thousand talents. That's a king's ransom! That's more than we can imagine. That's more than a man could have earned in a thousand millenniums! It represents the impossible debt that we all owe to God, for "the wages of sin is death" and who could pay the wages and survive? But we have a God who delights in mercy. He's more willing to forgive us than we are to ask forgiveness. He's more willing to forgive our sins than a mother is willing to pluck her child out of the fire. His mercy, compared to our sin, is a mountain compared to a grain of dust. Does your unbelief hinder you in coming? Look at the cross and the unbelief will melt. Behold Christ stripped naked and flogged for your sins and mine and your unbelief will melt. It was he who told us to pray: "When ye pray say, 'Our Father, which art in heaven, hallowed be thy name, thy kingdom come, thy will be done, on earth as it is in heaven. Give us this day our daily bread and forgive us our trespasses!'" (Mt 6:9-12). "Give us" and "forgive us." That's the first time in the Lord's Prayer.
where we find "and" joining two things. "Give us this day our daily bread and forgive us our trespasses." We need forgiveness as much as we need daily bread, even more so. And God offers to forgive us daily. Daily! For that's how often we sin. Daily, hourly, and moment by moment.

Every thought falls short of the perfect law of love. And every moment we need forgiveness. Scripture says, "If we confess our sins, he is faithful and just to forgive us our sins, and to cleanse us from all unrighteousness" (1 Jn 1:9). Just as the lacrimal gland of the eye is constantly washing the eye of the dust that settles upon it, so the blood of Christ continually cleanses the believer from all sin so that we stand spotless before him moment by moment. Remember what he said to his disciples that last evening. "He that is washed, needeth not save to wash his feet, but is clean every whit" (Jn 13:10). He that has been baptized by the Spirit of God, (as symbolized by the washing of water), that person has had his past sins blotted out. By faith he may also claim the cleansing blood of Christ, that his feet, stained with the dust of pilgrimage, might be clean. And then he is wholly clean.

For lasting health, for lasting happiness, believe that Christ's forgiveness is free, available, and continual. Take it. Claim it. Confess and believe you're forgiven. The word of God is the guarantee. Don't wait for feelings. He said it, it is so. In Romans 4:5, God is called the one that "justifies the ungodly." It doesn't say that he justifies the godly, but rather the ungodly! That's the meaning of Luke 15:2. "This man receiveth sinners." That's the meaning of Luke 19:7 where it says, "He's gone to be guest with him that is a sinner." Friend, are you a sinner? He wants to be a guest with you. He'll receive you. He'll justify you. You may claim it today. Make Christ your Savior and your sins are forgiven.

**Only Christ's Way Works**

Perhaps you've heard the story of the father who bought a toy for his child from a mail-order house. It was one of those toys that are rather complicated and had to be assembled by the parent. After an hour of frustrating experiment in trying to put the pieces together, the father discovered at the bottom of the box a message from the manufacturer — a small white card on which were printed the words:

"If all else fails, follow the directions." If you and I want to be happy, healthy, and indeed, live forever, we need to follow the directions. God made us. He sent along a message from the manufacturer. We find it wrapped between the covers of the book that we call the Bible. How tragic it is that we must try so many blind alleys; fail so many times in this business of living before we finally get around to following the directions.

When Jesus said, "I am the way," he meant just that. In the book of Acts, Christianity is referred to "as the way." I like the words of E. Stanley Jones:

> When we live the Christian way, are we living the way we were made to live? Made in the inner structure of our beings? Is life made for the Christian way as tracks and engines are made for each other? As blood and arteries have an affinity? As seed and soil are made for each other? To be good is good for you — your soul, mind, body, and relationships. To be bad is bad for you — your soul, mind, body, and relationships. You must love others or you cannot get on with others or yourself. Apparently God has us hooked. If you don't love others as you love yourself, you can't get on with them or with yourself.

It was Charles Edward Pugh who summed up the Christian way in these words:

> It's horse sense! It's sanity! And anyone who acts differently, is a damned fool. And I'm not swearing when I say it. Everyone who has experienced Christ knows that he was reverent when he said it for outside of Christ we damn ourselves to futility, to an impossible way of life and we know we're fools to try it."

And so, we can say with E. Stanley Jones that when we live the Christian way, we're at home in the universe, everything works for us. If we don't, we're out of gear. We're orphaned, we're estranged, we're not at home with ourselves or with people or with God. Our life will sag. It will lose its music. Things within us will cry out: "This is the unnatural way to live." Isn't it sad that we have to learn by bitter experience? We are all, by nature, tempted by the glitter and glamour of the world. Have you heard of Lord Chesterfield who wrote the famous letters to his son? Listen to his confession at the end of his life:

> I have run the silly rounds of business and pleasure and have done with them all. I have enjoyed all the pleasures of this world and consequently know their futility and I do not regret their loss. I have praised them at their real value which is in truth very low. Whereas they that have not experienced them, always overrate them. They only see their gay outside and are dazzled with the glare. I've been behind the scenes. I've seen all the coarse pulleys and dirty ropes which exhibit and move the gaudy machine. I've seen and smelled the tallow candles which illuminate the whole decoration to the astonishment and admiration of an ignorant audience. I, by no means, desire to repeat the nauseous dose for the sake of the fugitive dream. I think of nothing but killing time the best I can now that he's become my enemy.

Isn't it tragic that we have to learn moral truth for ourselves? In scientific truth, we stand on the shoulders of all our predecessors, but not so with moral truth. We learn by pain. Experience is the best teacher, but the most expensive. As an illustration, think of so-called free love. It doesn't exist. People learn too late that if it's free, it isn't love. If it's love, it isn't free. True love is willing to risk involvement. True love pledges a commitment for richer or poorer, for better or worse, in sickness and in health. There's no such thing as absolute freedom. Free a tree from its roots and it dies. Free a human being from moral restraints and life quickly sours.

**Obedience Is for Our Sake, Not God's**

And so what we're saying is that for lasting health and happiness, the Bible teaches us that we must follow the directions of our Maker. We must be obedient. Christ says, "Why do you call me, Lord, Lord, and do not the things that I say?" What God has joined together, let not man put asunder. Justification is followed by sanctification. Having declared us righteous, Christ makes us righteous. He gives us his Spirit to make us want to do what we ought to do. He writes his law in our hearts, for he
says to us, "Whoever will do the will of my Father, the same is my brother, my sister, and my mother, "for" if any man is willing to do his will, he shall know of the doctrine." Friend, all Christ's directions are given to us in love. They're all for our own good. Centuries ago, a man who influenced John Wesley called William Law, wrote A Serious Call to a Holy Life, and he gave this parable in it. Read it carefully:

Let us suppose a person destitute of that knowledge which we have from our senses plays somewhere alone by himself in a midst of a variety of things which he did not know how to use. Imagine that he has by him bread, wine, water, golden dust, iron chains, gravel, garments, fire, etc. And let it be supposed he has no knowledge of the right use of these things nor any direction from his senses as to how to quench his thirst, or satisfy his hunger, or make any use of the things about him. Let it be supposed that in his thirst he puts gold and dust into his eyes, and when his eyes smart, he puts wine into his ears. In his hunger, he puts gravel into his mouth. In pain, he loads himself with iron chains. In feeling cold, he puts his feet in the water. Being frightened by the fire, he runs away from it. And being weary, he makes a seat of his bread.

Let it be imagined that through his ignorance of the right use of the things that are about him, he vainly torments himself while he lives and at last dies, blinded with dust, choked with gravel, and loaded with irons. But now, let it be supposed that while he lives some good being came to him and showed him the rules of using these things. Such rules, which if observed, would make him the happier for all that he had and deliver him from the pains of hunger, thirst, and cold. There in some measure is a representation of the rules of religion. They just relieve our ignorance. They save us from tormenting ourselves. They teach us to use everything about us to our proper advantage. Man is placed in a world full of a variety of things. His ignorance makes him use many of them as absurdly as the man that puts dust in his eyes to relieve his thirst or puts on chains to remove pain. Isn't that true? Most people just don't know how to live. Life is like playing a violin solo in public and learning the instrument as one goes on. If you watch the faces of the passing crowd on any street, you'll become assured that most people look neither happy nor successful in life's adventure. People live at random and they make a mess of life. It's our passions uncontrolled by the laws of God that lead us to sorrow and tragedy. We wound ourselves by our follies, and then we blame God. The man of pride, for example, has a thousand wants which are just the creation of his own discontent. William Law, again, has a good word for us:

Let any complaining, disquieted man tell you the ground of his uneasiness and you'll see plainly he's the author of his own torment. He's vexing himself at some imaginary evil which will cease to torment him as soon as he is content to be that which God and nature and reason require him to be.

What can you conceive more silly and extravagant than to suppose a man racking his brains, studying night and day how to fly. Wandering from his house and home, wearing himself with climbing upon every ascent. Cringing and courting everybody he meets to lift him up from the ground. Bruising himself with continual falls, and at last breaking his neck. Or if you should see a man who has a large pond of water, yet living in continual thirst, not suffering himself to drink half a drop for fear of lessening his pond.

The author is talking about our pride, our ambitions, and our covetousness. All of us will discover, either the easy way or the hard way, that the law of God obeyed brings peace, joy, health, and happiness. When the revelation of God's love in the gospel breaks our hearts, such obedience becomes a privilege and pleasure and happiness is the inevitable glorious fruit. Then, in most cases, good health also will "spring forth speedily," (Is 58:8). Trust in the love of God will do more for our well-being than all the pills and potions in existence.

SUMMARY

Human beings are poor grovelers between faith and doubt, and only the gospel can save them from futility, disease, and death.

The great biblical message is that of the forgiveness of sins. The removal of guilt often means the restoration of health.

It dissolves most of life's relational problems when we deal with others as God has dealt with us.

Only the way of life set forth in Scripture, a way of truth, purity, and love, really works.

REFERENCES

2. Ibid., p. 42.
3. A Serious Call to a Devout and Holy Life, p. 91.
4. Ibid., pp. 88-89.
CHAPTER 48
That Dreadful Fatigue!

Fatigue in preceding centuries was chiefly physical. Today it is usually nervous in origin, the result of emotional stress. Only a balanced life, in harmony with the pattern set forth in Scripture, can save us from unnecessary fatigue and result in vigor and vitality.

He who can simulate sanity will be sane.

Ovid.

Why should I feel lonely? Is not our planet in the Milky Way?
Thoreau, Walden.

Woe to him that is alone when he falleth; if he hath not another to help him up.
Ecclesiastes 4:10.

Lo, I am with you always, even unto the end of the world.
Matthew 28:20.

Do not I fill heaven and earth?

If I ascend to heaven, thou art there! If I make my bed in Sheol [grave], thou art there! If I take the wings of the morning and dwell in the uttermost parts of the sea, even there thy hand shall lead me, and thy right hand shall hold me.
Psalms 139:8-10 RSV.

The Weary Twentieth Century

We live in a world where we hurry and worry and bury. Years ago the American psychologist, William James, warned us: "Beware of those absurd feelings of hurry and having no time – that breathlessness, and tension, that anxiety of feature, that solicitude of results, that lack of inner harmony and ease."

We need to face the fact that today's world puts strain on the nerves, emotions, and the mind in general, not on the muscles. It is difficult to live a balanced life in the twentieth century. The great Greek philosopher, Plato, said that all sickness is a result of lack of proportion between the use of body and mind, and the great Americans who helped establish this wonderful country agreed. Thomas Jefferson warned the students of his day: "Unless you exercise the muscles at least one hour a day, you'll not be truly efficient." If we were able to move backwards in time to the 1890s, the first thing we would notice would be the quietness of life. But our world is a noisy bedlam that brings emotional and physical jadedness.

One of the most common problems the modern generation faces is this fatigue. Constant weariness makes enthusiasm and work difficult or impossible. How can one be a witness and a worker for Christ if he or she is always tired?

To a great degree, prolonged fatigue is a twentieth-century phenomenon. For thousands of years people became weary through heavy physical labor. But that is rare today. Tiredness from physical exertion is easily healed by a good night's sleep. But most modern weariness is not so easily remedied. Nine-tenths of modern fatigue is mental and emotional in origin, and to understand that fact is to be halfway towards the cure. If you are extremely weary day after day, the cause is almost certainly not physical, but emotional and mental. Dr. A. A. Brill, who was one of America's most distinguished psychiatrists, had this to say:

"One hundred percent of the fatigue of the sedentary worker in good health is due to psychological factors, by which we mean emotional factors." ¹

Another expert, J. A. Hatfield, in his book The Psychology of Power, said:

"The greater part of the fatigue from which we suffer is of mental origin. Exhaustion of purely physical origin is rare." ²

The insurance companies have done a great deal of research on matters of health. Note some lines from one special leaflet on fatigue:

"Hard work by itself seldom causes fatigue which cannot be cured by a good sleep or rest. Worry, tenseness, and emotional upsets are three of the biggest causes of fatigue. Often they are to blame when physical or mental work seems to be the cause. Remember a tense muscle is a working muscle. Ease up, save energy for important duties."
In other words, if you are emotionally tight and tense, your muscles will be too, and you will suffer from a tiredness that cannot be relieved by sleep.

The Bible doesn't address the subject of fatigue in any direct way, but its writers do make some astute observations. Consider Ecclesiastes 10:15: "The toil of the foolish wearies him, because he knoweth not how to go to the city." That's an interesting text. When it says "he knows not how to go to the city," that is the equivalent of saying, he doesn't know enough to come in out of the rain. The text means, "The labor of a foolish person is wearying." When a person is confused and doesn't know the right way to act, that person will suffer from unnecessary fatigue.

In contrast, read John 4, where we learn of Jesus being wearied with his journey sitting by the side of a well. This fatigue was not emotional but physical. Jesus had walked about twenty miles that morning. The reason John makes that reference is to assure us that our Lord had a nature like ours, a truly physical nature. He was a real man! Even Adam would have been wearied by toil in the Garden of Eden.

Consider the most important reference in the Bible on weariness. Here are the most beautiful words in the world. "Come to me, all who labor and are heavy laden, and I will give you rest. Take my yoke upon you, and learn from me; for I am gentle and lowly in heart, and you will find rest for your souls. For my yoke is easy, and my burden is light" (Mt 11:28-30). Our Lord sees so clearly that our weariness is chiefly weariness of soul. He says we can find rest for our souls, our hearts. Our minds can be filled with peace and the result will be that our body will be filled with the energy, vitality and effervescence that grows out of joy.

Is Our Fatigue Physical or Emotional?

If we are worried that our Christian witness is impaired by our constant fatigue, we should look into the matter and ask ourselves, "Is my fatigue that rare physical type or is it emotional or pathological?" Sometimes a medical checkup reveals that an organic disease is responsible for weariness. In many cases women who lack iron suffer from pathological weariness. A heart defect, diabetes, and thyroid problems can produce the same results. But this type of fatigue, like physiological fatigue, is the exception and not the rule. So we are back to where we began: the chances are more than ninety out of a hundred, that if we are continually tired, there is some emotional conflict, some great anxiety, or perhaps, extreme boredom.

Dr. Frank Allen, a Boston internist, studied 300 victims of chronic exhaustion. He found that only 20 percent were tired for purely physical reasons. The other 80 percent had emotional difficulties.

**We need to study the way we live.** *Any activity that is carried on too long or too intensely can bring weariness.* Solomon said that much study is a weariness of the flesh. Too much concern about or concentration on anyone thing can result in exhaustion.

But our chief weariness is weariness of the soul, anxiety about our failures, our sins, our loved ones, our troubles. When we realize that Jesus took our place and died for us; that by accepting the gift of salvation by simple faith, we stand before God as sinless as Christ himself, then it is our privilege to experience great peace of mind. When we remember we can never be lost so long as we look to Jesus our Lord, then we shall find peace, joy, and abounding energy. If Christ can be trusted with our greatest problems — guilt and impending death — he can be trusted also with all the rest. If one feels guilty, fatigue will often be one of the results. There is a vital connection between sin and health. Though not all disease is a result of one's own sin, it remains true that many of our physical problems are the result of our personal follies. There is a story in Matthew 9:2-6 that has solemn lessons for us today.

And behold, they brought to him a paralytic, lying on his bed; and when Jesus saw their faith he said to the paralytic, "Take heart, my son; your sins are forgiven." And behold, some of the scribes said to themselves, "This man is blaspheming." But Jesus, knowing their thoughts, said, "Why do you think evil in your hearts? For which is easier, to say, 'Your sins are forgiven,' or to say, 'Rise and walk?' But that you may know that the Son of man has authority on earth to forgive sins" — he then said to the paralytic — "Rise, take up thy bed and go home." And he rose and went home.

Jesus could have said those last words first, but instead he dealt with the man's biggest problem, which wasn't physical at all. It was spiritual. "Your sins are forgiven." For most of us it is the same. Our biggest problem may not be physical at all. It may be spiritual.

The phenomenon of guilt is clearly linked by Scripture with fatigue and disease. Psalms 32:3 says: "So long as I refused to own my guilt, life ebbed away, my body dried up as in summer heat." Once we confess our sins, once we own up to them, we have disowned them. Forgiveness of sins is the — "Gate Beautiful" at the entrance of the temple of Christian life. Forgiveness of sins is always available to all who seek it. When we pray, we ought always to say, "Forgive us our trespasses" and he will. "If we confess our sins, he is faithful and just to forgive us our sins and to cleanse us from all unrighteousness" (1 Jn 1:9). In 3 John 2, the apostle writes, "Beloved, I wish above all things that you may prosper and be in health even as thy soul prospereth." There again the emphasis is on a connection between health of body and health of soul.

Self-Centeredness Makes Us Tired

We are too often self-centered. This leads us into an endless round of seeking assurance that we are of value. But that assurance can only be found in accepting God's acceptance of us. Don't worry too much about your attitude toward God. It's his attitude toward you that counts. Our love to God is like the moon; it is only a reflection of his love, the sun. It is never a perfect reflection, but full of holes at all times, and only rarely at the full. It is often just a waning streak. Concentrate instead on God's love to you. It is like the outpouring of the sun, always at the full; always unchanging. The only barriers are the mists of unbelief and sin that we put up. Colossians 2:6, 7 tells us that as we received Christ Jesus the Lord, so we should walk in him. We received him by faith alone, not by feeling, not by achievement, not by doing anything. That's the way we are to live in him. Don't expect to be good enough today. Don't expect to climb to heaven today by Mount Sinai. Accept your acceptance in Jesus Christ. Read again the last verses of Romans 5, which tell us five times that righteousness is a gift. It even calls it a free
of conflict and disorder, which is the root of much mental and physical suffering. We need to understand the law of cause and effect, which is the foundation of all natural phenomena. The law of cause and effect is the law of proportion and an understanding of the relationship between body and soul. A lack of balance can make us erratic not only in behavior, but in our feelings. Luke 2:52 says that Jesus "increased in wisdom and stature, and in favor with God and man." Here we see our Lord Jesus Christ physically, mentally, spiritually, and socially well balanced. We need to strive after that same balance. People on assembly lines often suffer from fatigue because they are bored. Routine work can bring about a weariness of soul. God has given us a mind that needs exercise, variety, and change. This was one of Plato's sayings: "All sickness is the result of a lack of proportion between body and soul." A lack of balance can make us erratic not only in behavior, but in our feelings.

Understanding the Law of Cause and Effect Is a Key

Perhaps the first thing we can do, having determined which is our particular type of weariness—physical, emotional or nervous—is to realize that life is not casual but causal. Every moment is a recapitulation of all previous moments, as well as being pregnant with all the future. I am what I am, because I have been doing what I have been doing. The Bible again and again says that we need to face the reality that life is a matter of cause and effect. There are so many statements in Scripture like that. Study Proverbs 26:2, "As the bird by wandering, as the swallow by flying, so the curse causeless shall not come." And Numbers 32:23: "But if ye will not do so, behold, you have sinned against the Lord and be sure your sin will find you out." The law of God is written on every nerve, sinew, and fiber of our being. Intellectual power, physical stamina, and length of life, depend upon immutable laws. A very large share of the sickness and suffering in our society is the result of the transgression of physical or spiritual law. In other words, it is brought upon us by our own wrong habits.

Sin and disease often bear the relationship of cause and effect; though we must never fall into the error of saying that everyone's sickness is the result of his sins. It can be the result of someone else's sins, perhaps that of one's parents. But we are suggesting that to understand the connection between cause and effect is to travel a long way towards curing our problems. It is a great thing to insure health by placing ourselves in a right relation to the laws of life. When we remember that a large share of sickness and suffering comes from transgression of physical law, we can look into our own weariness and ask, "Can it be that I too am transgressing some of God's laws about thoughts, feelings and actions?"

A balanced life is as hard to find as a needle in a haystack. Many of us grow weary because of the lack of balance in our lives. Plato's saying bears repeating: "All sickness is the result of a lack of proportion between body and soul." A lack of balance can make us erratic not only in behavior, but in our feelings. Luke 2:52 says that Jesus "increased in wisdom and stature, and in favor with God and man." Here we see our Lord Jesus Christ physically, mentally, spiritually, and socially well balanced. We need to strive after that same balance. People on assembly lines often suffer from fatigue because they are bored. Routine work can bring about a weariness of soul. God has given us a mind that needs exercise, variety, and change. This was one of the reasons behind the Sabbath institution.

Stress is somewhat like a violin string. When the string is too loose, it cannot create good music. And if it's too tight, there is too much sound and no music at all. We need to find the right tension for our lives. Understanding the law of cause and effect helps us to find that balance.

Learn to Prioritize

Remember the 80/20 principle. Eighty percent of what we do gives us only 20 percent of satisfaction. But 20 percent of what we do gives us 80 percent of satisfaction. Realize you cannot do everything. Put first things first and let the others go. Put in your time where it counts. Consider what you are doing that others should do and let them do it. Give yourself a chance to think. Many a problem is just the absence of an idea.

The first priority, of course, is to find peace in Christ through the gospel. When you discover that his burden is light, and his yoke is easy, then you will find yourself free to serve other people. Instead of striving to climb up Mt. Sinai to heaven, instead of depending upon your own perfection before you can rest, realize that salvation is free, righteousness is free, and forgiveness is a gift. Realize that God has already put away your sin, past, present, and future (Jn 1:29, 2 Cor 5:14-21). If you believe that, you are most of the way towards productivity and fruitfulness, joy, health, and vitality. If you have found forgiveness of sins and know the presence of God, you will recognize the wisdom of not allowing yourself to be upset by the eternal confusion, the randomness, the tragic-comic nature of life. You will expect life to be that way. You will learn to accept it without bitterness, and to treat frustrations like the weather, just going on to other things. That's the road to serenity. "Seek ye first the kingdom of God and his righteousness, and all these things will be added unto you" (Mt 6:33). Look unto Jesus, the author and finisher of our faith. If you have made him first, and best, and last in everything, all else will be well.
Our Lord tells us repeatedly in the Gospels that life operates in terms of causation. Whatever we measure out to others will be measured back. Jesus said, "Take heed what you hear, the measure you give will be the measure you get." (Mt 4:24). "For with the judgment you pronounce, you will be judged" (Mt 7:2). Galatians 6:7 says, "Be not deceived; God is not mocked, for whatsoever a man soweth, that shall he also reap." Hosea 8:7 states: "They have sown the wind, and they shall reap the whirlwind." This text does not refer only to our sin and its consequences. It is referring to the fact that all life is causal. We repeat: every moment is a recapitulation of all earlier moments. Every moment is pregnant with all the future. I am what I am, because I have been doing what I have been doing. It is the balanced life that we must strive after.

Remember You Are Not an Angel – You Have a Body

Our first duty is to love God with our minds. Christians should be intelligent. They should learn to read serious books, not just storybooks. "Jesus increased in wisdom and stature." He cared for his body as well as his mind. He had to be physically perfect because he was the antitype of the sacrifices that were without spot or blemish. Christians need to care for their bodies. We have over 600 muscles, all meant to be used.

When the Yankee Stadium in New York was rebuilt some time ago, they had to have 900 less seats because the American bottom is now on average 3 inches broader than it was decades ago. We do too much sitting. We sit in soft, comfortable chairs, and as a result, we get a crick in the neck, a pain in the back, a pot in the belly and a clot in the leg. The body won't stand for much sitting. We read in John 4, that the fatigue Jesus experienced was physiological. He had walked all morning, about twenty miles, and so he was weary with his journey. Many of us are weary because we do not walk. It's a physiological law that we have to spend physical energy in order to store it. We have to use our muscles in order to gain strength. Those people who never exercise their bodies will progressively become more and more prone to fatigue.

Second, those people who continually eat junk foods, forget that in so doing they are sapping their capacity to do and to achieve. To eat refined foods, (specifically refined fats, oils, and grains), to live mainly on processed foods out of packages and cans, is sowing to the wind, and we will reap the whirlwind. "The curse causeless shall not come," but what we eat and drink today will be walking and talking tomorrow. We are what we eat. Death, de-e-a-t-h is mainly e-a-t.

Third, we now know that exercise alone is not enough. Neither is diet alone sufficient. Many women are psychologically fatigued because they worry about being overweight. They have tried all sorts of dietetic cure-alls. However, the balanced life is the only cure-all. If you do not have an organic problem such as a thyroid deficiency, no diet in the world can solve the weight problem unless you exercise as well. Seek for the balanced life. Care for your body.

The Ten Commandments Are Not Outdated

The Ten Commandments point the way as does the Sermon on the Mount. In the Ten Commandments, the first four focus on our relationship to God in worship – who to worship, the manner of worship, the approach of worship, and the time for worship. And then the commandments focus on our relationship to our fellowman. First comes our obligation to our parents, and then because life begins in the family, our responsibility to life. Because life has two forms, we have duties with respect to the relationship between the two sexes. In the family, besides the beginnings of life and sexuality, we have property and reputation. The eighth and ninth commandments deal with that. The tenth commandment deals with the stewardship of thought. We are not even to think wrongly. This, then, is what God tells us about a true life; he will be first, the family second, the country third, other people fourth, and things last (thou shalt not covet ... any thing). Our thinking is the root of the whole.

When Jesus tells us in the Sermon on the Mount to seek first the kingdom of God, he is warning us about the necessity of seeing life in terms of priorities, just as the Ten Commandments tell us. To fail to do this brings inevitable confusion, and with confusion always comes fatigue. How is it with your life? Do you take time for God? For worship? Do you place the kingdom of the Lord first? If you do not have an organic problem such as a thyroid deficiency, no diet in the world can solve the weight problem unless you exercise as well. Seek for the balanced life. Care for your body.

Christ did not intend that our lives should always be crammed with work. He did not intend for us to be continually under strain and stress. Even when he told the disciples that the harvest was great and the laborers few, he did not urge upon them the necessity of ceaseless toil. Instead he suggested: "Pray ye therefore that the Lord of the harvest will send forth laborers." To his own disciples he commanded on one occasion, "Come ye yourselves apart and rest awhile." Towards the end of his ministry, he took three months off for a summer vacation. Learn to rest. Rest is repair. It's not laziness. We are stepping back in order to jump further. We are tarrying for a while that the work might be finished sooner. According to the Genesis record, Adam and Eve rested before they worked. Have you learned to rest and to worship, and to work body and mind in true proportions? Is it your desire to follow your Lord who increased in wisdom and stature and in favor with God and man? He says to you today, "Come unto me all ye that labor and are heavy laden and I will give you rest. Come, learn of me."

The Mind Is Not for Ballast – Use It!

The Bible is so emphatic that the way we use our minds, the choices we make, have a tremendous impact upon our health and happiness. It is so easy to envy other people. We see the positives of their life-situations and not the negatives. We see the benefits they enjoy, but we do not see the thorns in their crowns. Envy is a common sin. Proverbs 14:30 says, "A tranquil mind gives life to the flesh, but passion makes bones rot." Or as Moffatt translates it, "A mind at ease is life and health, but
passion makes man rot away." Here Scripture closely links erroneous mental attitudes with devastation of physical health. In Proverbs 17:22, we read, "A cheerful heart is a good medicine, but a downcast spirit dries up the bones." Or as Moffatt translates it: "A glad heart helps and heals. A broken spirit saps vitality." Did you get it? A broken spirit saps vitality. If you have lost joy, faith, hope, assurance, inevitably you will lack vitality. Not all lack of vitality springs from this, but in many cases it is so.

In Romans we read, "May the God of hope fill you with all joy and peace in believing so that by the power of the Holy Spirit you may abound in hope" (15:13). The positive emotions bring with them surges of energy. Read the resurrection accounts in Matthew, Mark, Luke, and John. One verb occurs over and over again. They "ran." They were so filled with joy they couldn't walk, they ran when they knew that Jesus was alive, and that, therefore, one day they too would live forever. Their minds were so filled with joy that vitality was unleashed in their bodies.

Consider this statement from the great English mathematician and philosopher, Bertrand Russell. It's a practical comment and Christians can derive much benefit from it.

It's amazing how much happiness and efficiency can be increased by the cultivation of an orderly mind, which thinks about a matter at the right time rather than inadequately at all times. When a difficult or worrying decision has to be reached, as soon as all the data are available, give them out of your best thought and make your decision. Having made the decision, don't revise it unless some new fact comes to your knowledge. Nothing is so exhausting as indecision and nothing is so futile. 4

If you are suffering from guilt, one of the fruits of it will be the inability to make certain decisions. Repeatedly, the Bible suggests to us that our transgression can bring us a lowered vitality of body. In Psalm 107: 17, 18 it says, "Some weakened by their sinful ways were sick and suffering through evil doing. They had a loathing for all food. They were on the verge of death" (Moffatt). Consider too 1 Corinthians 11:28, 30, "Let a man examine himself, so let him eat of that bread and drink of that cup. For he that eateth and drinketh unworthily, eateth and drinketh damnation to himself, not discerning the Lord's body. For this cause many are weak and sickly among you and many sleep." Moffatt puts it: "That's why many of you are ill and infirm and a number even dead." There is a close relationship between sin and sorrow, between sin and sickness, though not all sickness comes from individual sin. In John 5, our Lord healed a man who had been paralyzed for forty years, and when he bent over him, he said, "Would you be made whole?" And then he healed him. Having done so, our Lord said to him, "Sin no more, lest a worse thing come upon thee."

The Bible has very practical counsel about the right attitudes of mind, for health, and vitality. There is a beautiful statement in Isaiah 58:10, 11 which reads: "If you pour yourself out for the hungry and satisfy the desire of the afflicted, then shall your light rise in the darkness and your gloom be as the noonday. And the Lord will guide you continually and satisfy your desire with good things, and make your bones strong; and you shall be like a watered garden, like a spring of water, whose waters fail not." Much of our sickness and sorrow comes out of our self-engrossment. When we learn to give and to share, and impart to others the good things of the gospel and the good things of this life, then our own souls will become like a watered garden, like a spring of water whose waters fail not.

Wrong thinking determines our readiness to sin. It's our thinking that precipitates guilt upon us. Mark 7:21-23 reads, "For from within, out of the heart of men, proceed evil thoughts, adulteries, fornications, murders, thefts, covetousness, wickedness, deceit, licentiousness, an evil eye, blasphemy, pride, foolishness. All these evil things come from within, and they defile a man." And in contrast, in Philippians 4:8, Paul says, "Finally, brethren, whatsoever things are true, whatsoever things are honest, whatsoever things are just, whatsoever things are pure, whatsoever things are lovely, whatsoever things are of good report, if there be any virtue, if there be any praise, think on these things." We become like what we think about all day long.

We are told in Psalms 115 that those who make idols become like them. By looking at Jesus we become like Jesus. The Bible tells us that infantile thinking must be overcome. "When I was a child, I spake as a child, I understood as a child, I thought as a child: but when I became a man, I put away childish things" (1 Cor 13:11). We should be childlike, but not childish. We can be childlike in our faith and trust and spontaneous love, but not childish in selfishness and fear. Proverbs 21:5 reads, "The thoughts of the diligent tend only to plenteousness, but of everyone that's hasty only to want." Proverbs 23:7 says: "As he thinketh in his heart, so is he." And in the same book it says: "Keep thy heart with all diligence, for out of it are the issues of life" (4:23). Preservation of vitality begins with the proper use of the mind. Health of soul and body depends first of all upon our choices of thoughts. God is tremendously concerned with that. "The word of God is quick, and powerful, and sharper than any two-edged sword, piercing even to the dividing asunder of soul and spirit, and of the joints and marrow, and is a discerner of the thoughts and intents of the heart" (Heb 4:12). God discerns our thoughts, our purposes. He desires truth in the inward parts.

Again and again, Scripture warns us against negative thinking. There is much being said today about positive thought, and it is true in what it affirms, but sometimes false in what it denies. There can only be lasting value in positive thinking that is true and of eternal significance. The Bible does have many warnings against negative thinking. Matthew 6:34 says: "Don't worry about tomorrow. Tomorrow will have worries of its own. Let each day be content with its own ills." Scripture warns us against fearing other men. Hebrews 13:6, "We may boldly say the Lord is my helper, I'll not fear what man shall do unto me." It also warns us against fearing death. "Yea, though I walk through the valley of the shadow of death, I will fear no evil, for thou art with me." Though I had been paralyzed for forty years, and when he bent over him, he said, "Would you be made whole?" And then he healed him. Having done so, our Lord said to him, "Sin no more, lest a worse thing come upon thee."

Many people think negatively because they have such a low estimate of themselves. There is a sense in which, when compared with God, we can call ourselves a worm, a guilty worm, as one hymn says. But on the other hand, God makes a man or woman, a boy or girl, "more precious than the golden wedge of Ophir." Matthew 10:31 affirms, "You are of more value than many sparrows."

However fatigued you may be, begin with the mind. Are you thinking right? Are you rejoicing in the forgiveness of sin? Have you accepted God's acceptance of you so that you can accept yourself and then accept others? That is the order and there is
no other. That leads to everlasting happiness. But having done that, remember that you have a body. When you exercise, the blood flows up to twenty times faster. The oxygen intake is many times higher. Remember the brain uses 20 percent of the oxygen that is drawn from the blood, so a deficiency of oxygen can promote depression and fatigue. Remember to take time to rest. Take all the sleep you really need, but also the activity you really need. "Glorify God in your body and in your spirit, which are God's." "Whether you eat or drink, whatsoever you do, do all to the glory of God." "Present your bodies a living sacrifice, holy, acceptable unto God, which is your reasonable service."

Scripture is the greatest book in the world for dealing with the problem of fatigue. Just the thought of God's love for you cherished day by day can change, wonderfully change your life by recharging your energies. Practice his presence, and your sun will no more go down eclipsed by unnecessary fatigue.

SUMMARY
Almost all the fatigue of sedentary workers in good health is due to psychological factors. Worry, tension, and emotional upsets are key causes of fatigue.

In order to have abundant physical energy one must expend much energy in regular exercise.

Stress is somewhat like a violin string. When the string is too loose it cannot create good music. If it is too tight, the same. Thus it is with stress. What we need is balance.

The ability to prioritize is vital for the person who wishes to avoid unnecessary fatigue. Master the 80/20 principle.

The peace that the gospel brings is a great alleviator of fatigue.

People with unforgiven sin are more prone to fatigue than those who have experienced the joy of forgiveness.

We need to learn to rest physically, mentally, and spiritually, as well as to labor in all three areas.

The Sabbath is a principle of life, not just a weekly institution.

Dwell more on God's love to you than your love to him. This is the main feature of that true positive thinking that resists fatigue.

Hard work seldom causes fatigue that can't be cured by good sleep, but continued emotional stress and tension result in prolonged weariness. The world's motto today is: "Hurry, worry, bury." In Christ's great invitation we have the real remedy for soul fatigue. We are to take his yoke and learn of him and thus find rest.

Any concern or activity that is carried on too long or too intensely can bring weariness. Solomon said, for example, that much study is a weariness to the flesh. Too much concentration on anyone thing can result in exhaustion.

We need to remember that life is a matter of cause and effect, it is causal not casual in operation.

A balanced life is as hard to find as a needle in a haystack, yet that needle we should all be seeking.

Both the Ten Commandments and the Sermon on the Mount, as the other teachings of Christ, stress the principle of priority (see Mt 6:33).

REFERENCES
4. The Conquest of Happiness, p. 45

Highest-pressure and Lowest-pressure Jobs in the United States
In a 2-year study conducted by the National Institute for Occupational Safety and Health in cooperation with the Tennessee Department of Mental Health and Mental Retardation, over 22,000 health records of workers in 130 jobs were studied for stress-related diseases. The frequency of these diseases in the various jobs resulted in the following lists of highest- and lowest-stress jobs.

**Highest**
1. Manual laborer
2. Secretary
3. Inspector
4. Waitress/waiter
5. Clinical lab technician
6. Farm owner
7. Miner
8. Office manager
9. House painter
10. Manager/administrator
11. Foreman
12. Machine operator

**Lowest**
1. Clothing sewer
2. Checker, examiner of products
3. Stockroom worker
4. Craftsman
5. Maid
6. Heavy equipment operator
7. Farmer laborer
8. Freight handler
9. Child care worker
10. Packer, wrapper in shipping
11. College or university professor
12. Personnel, labor relations
13. Auctioneer/huckster

CHAPTER 49
Doing More by Doing Less

Truth is often paradoxical. People often go down when they try very hard to go up, and some prepared to go down ultimately find themselves up. Whoever owns his sin really disowns it, and whoever denies his sin confesses that it possesses him.

Similarly, sometimes we go forward by apparently stopping still, or even going back. Sometimes we do more by doing less. God's ways are not our ways, and he wants to teach us that all our work without his blessing can only take us backwards. Therefore, our chief duty is frequently to stop, to look at him, and to listen and obey.

Sudden death is nature's way of telling you to slow down.

"He maketh me to lie down ...” Ps. 23:2

Being and Doing

One day, while waiting for a church service to start, I opened one of my many old notebooks and began to read again some notes from books I had read over twenty years ago. Truths, which had impressed me decades back, sprang out from the scribbled ink lines. But further reflection on the poor progress in applying these insights to my daily life brought me sadness and humility.

Meditating upon this, today, as the result of rereading an old book, I realized afresh that my old nature was just as bad as it had ever been, and that the growth of the new was slow, tedious, and often halted. But let me share with you what impressed me in the early sixties. The words are those of preacher, administrator, and author, W. E. Sangster, one-time leader of Methodism in Britain.

It became clear to me that what we are is so much more important than what we do; that what we do is at its best only a reflex of what we are: that the big business of life is not to crowd more and more into our days (my own life-long error) but to be in our small way an incarnation of our Lord. No day is a failure in which Jesus has really indwelt us: no day is a success (however effective in the worldly sense) in which his reflection in us has been badly blurred.

The aim, then, is to so order one's thinking: so steadily to hold the mirror of one's life up to the Lord that all my life becomes a reflection of His. Then one preaches without words; love informs all one's doings, and the slightest contact with another is capable of imparting the Lord.

Life is not to be assessed by the amount done, but by the love offered and the width of the channel I offer God for His grace.

Now read another statement from Sangster. Towards the end of his life he printed the following lines on a Christmas card which was sent to all his friends:

Slow me down, Lord. Give me, amidst the confusion of my day, the calmness of the everlasting hills. Break the tension of my nerves and muscles with the soothing music of the singing streams that live in my memory. Help me to know the magical restorative power of sleep. Teach me the art of taking minute vacations ... of slowing down to look at a flower, to chat with a friend, to pat a dog, to read a few lines from a good book. Slow me down, Lord, and inspire me to send my roots deep into the soil of Life's enduring values that I may grow towards the stars of my greater destiny.

When his wife first saw the wording, she exclaimed: "You can't send that, Will. Some of our friends need a squib to wake them up, not advice to slow them down."

Of course she was partly right. "Man," as Luther said, "is like a drunken peasant who falls off his horse on one side or the other." None of us are quite balanced, we tend to err on either one side of an extreme or its opposite. Mrs. Sangster's protest that many err by extreme quiescence was the protest of good sense and is applicable to a large number who sit in Christian pews and to some behind the pulpit.

Some Forever Sit on the Brake, but Others Are Pathological Accelerators!

But for today, I am looking at the opposite error – an error linked not only to temperament, blood sugar, hormones, and the like, but also to our inborn legalism. When Herbert Spencer visited the USA in the nineteenth century, newspapers wrote up his speech with avid interest. Spencer warned his listeners that men in this country were too much involved in activity that seemed endless. He suggested that interdependence in labor would considerably shorten the lives of most American businessmen. Perhaps there is something in that. William James was a native-born American, hailed as one of the two greatest philosophers belonging to this continent, the other being John Dewey. His sentiments are identical with those of the Britisher. One of the most famous lectures of William James deals with the issue and is entitled "The Gospel of Relaxation." Allow me to quote some of its most significant words:

Your intense, convulsive worker breaks down and has bad moods so often that you never know where he may be when you most need his help – he may be having one of his "bad days." We say that so many of our fellow-countrymen collapse, and have to be sent abroad to rest their nerves, because they work so hard. I suspect that this is an immense mistake. I suspect that neither the nature nor the amount of our work is accountable for the frequency and severity of our breakdowns, but that their cause lies rather in those absurd feelings of hurry and having no time, in
that breathlessness and tension, that anxiety of feature and that solicitude for results, that lack of inner harmony and ease, in short, by which with us the work is so apt to be accompanied.

I think William Sangster would have felt condemned by the last paragraph. I hope so. For too often it condemns me, just as does much of what James said prior to those lines.

Earlier in his lecture, William James commended Hannah Whitall Smith’s book The Christian’s Secret of a Happy Life and towards the close he did the same for The Practice of the Presence of God, by the Carmelite friar, Brother Lawrence. Both of these Christian classics urge their readers to look more at their choices than their feelings, and to practice continually the sense not only of God’s presence but of his overruling providence doing all things well. The trouble is good advice is easier to read than to follow. The good habits recommended are just that – habits, and habits take time and effort to form. God, ever since he made the world, has been trying to get us into these very habits. How? By the regular practice of worship. Surely there is no more important question. The answer may seem platitudinous and trite, but it is the answer. In worship we become preoccupied not with ourselves but with God. We dwell upon him until the glory of that vision is so strong, that some of its luminescence will transfigure all our secular pursuits. Only then can our daily frenzy lessen.

Stop a while and finish the sooner. Step back and jump further. These old proverbs tell us the principle inherent in worship. Worship is a tarrying, so that our work might be done not only better but often more quickly. Because what I am is so much more important than what I do, my chief business is identical with that of Mary of old who chose that better part which could not be taken from her. That’s why from the beginning God gave us liberty to be as unwise as Martha for six days if we wished, but then at least on the seventh to emulate Mary until a better balance was ultimately achieved. "Be still and know that I am God" is the meaning of the fourth commandment and the heart of every experience of worship.

The Jews came to Christ with the characteristic inquiry: “What shall we do that we might work the works of God?” and received the reply, “This is the work of God that ye believe ...” (Jn 6:28-29). What we believe in our heart of hearts is more important than what we do, for ultimately doing is the reflection of believing.

Wordsworth wrote:

... the world is too much with us,
Getting and spending we lay waste our powers
We have given our hearts away, a sordid boon...

Surely he had it right. In a previous article we spoke of the parable in Goethe’s Faust where a tidal wave inundates the structures on the land which represent the church and its worship, and the family. These two are the pillars of life as God intended it to be. When they go, all goes. It’s only a matter of time.

When will we learn? When will we cease our feverishness and rest more in the divine adequacy, and then proceed to labor in that confidence? The message is written in our bodies, though it has not reached our minds. Not only is the message in our bodies but in the universe itself and all its parts, as well as in divine revelation.

Consider the way in which cycles and rhythm characterize so much of nature – the seasons, day and night, the tides, etc. Think of bird migration, animal hibernation, human work and sleep. Did you know that many body cells work in relays? Some are working while others are resting. Only a proportion of kidney nephrons are operating at any moment of time. The time comes for them to rest while others go on shift. This is true also of the brain and of other organs. A nursing mother produces milk as the baby is at the breast, but when the infant rests so do the breasts. The case is similar with the digestive organs. Body temperature, blood pressure levels, etc., follow circadian rhythms.

Worship: The Pause That Truly Refreshes

Obviously, there is nothing odd about the worship and rest commandment. It reflects that reality present throughout the whole of humanity and the entire universe. We violate it at our peril. God IS much more concerned about our being than our doing, and it is by beholding that our being is shaped. “Looking unto Jesus” is the law for running the Christian race successfully. Looking thus takes time and quiet. Happy the person who forms the regular habit of adoration.

For the constant worshiper, life will gradually lose its feverish qualities, its threat of panic, its senseless demand for hectic haste. For it is written "he that believeth shall not make haste" for "in quietness and in confidence shall be your strength" (Is 28:16; 30:15).

That most energetic of New Testament theologians – James – was not one who believed in frenetic activity. He was not like those moderns who think of God as an anxious coach walking the sidelines, chewing his fingernails, while the boys act out there as though they were human counterparts to hyperthyroid squirrels. Listen to James and note how right his priorities are.

Observe that the works he advocates are really "fruits" and spring from a mind-set that is peaceable.

But the wisdom that is from above is first pure, then peaceable, gentle, and easy to be intreated, full of mercy and good fruits, without partiality, and without hypocrisy. And the fruit of righteousness is sown in peace of them that make peace. (Jas 3:17-18)

All of which fits in with that ancient law: "In earing and harvest times thou shalt rest." Even in the busiest periods the laws of our being are not to be violated. Why? Because as mentioned earlier, being is more important than doing.

But there are other reasons, and one of them has only very gradually dawned on this slow mind over recent years. The flurried, exhausted soul is a poor witness for Christ. Such a person repels rather than attracts. It is virtually impossible to bear a good testimony while jaded. Times without number, I have known the experience of avoiding folk I knew very well, just because, at that particular moment, I felt too tired to expend the further vitality drawn on for effective personal interchange. Tragic and stupid.
Some years back scientists experimented with a flock of sheep. The sheep were given regular electric shocks until they manifested the symptoms of nervous breakdowns. On a later occasion, the same sheep were given the same shocks but with significant rest periods between each series of shocks. Then there were no breakdowns.

Luther said legalism is like an oil in our bones. We think our frantic activity will bring in the kingdom of God. And it is true that God has no voice but ours, and no hands but ours, that he usually chooses to use. There is no such thing as a lazy Christian. But on the other hand, is it not true that our part in the harvest, though essential, is not the major part? Seed-sowing is easy. What if turning on the heat and the rain was also up to us? Have not the most important events in our life been those that have come out of the blue, untriggered by us, recognizably the fruitage of divine providence?

Napoleon affirmed that many victories were gained by the way of indirection rather than frontal attacks, by strategy rather than by strength. The battle of life is won the same way. It's natural to attack with all there is of us all the time. But that method leads to ultimate defeat. To live by faith means more than the solution to guilt – it means obeying God's strategy, however repugnant its demands may be to our legalistic instincts. Only by faith alone can we "cast our deadly doing down, all down at Jesus' feet" and rest awhile in order to behold him in worship. But that has been the way of patriarchs, prophets, and apostles.

There was a time when Dwight L. Moody was making two hundred pastoral calls a day. But the world never heard of him then. When parishioners told him that quality was more important than quantity, and that they were praying for him to receive the Holy Spirit, his life changed. From then on every day began with hours of worship before God with the Word. He kept every seventh day strictly as a rest day. And he changed the world.

Some of us will do more when we do less. That is the strategy of faith, and it was never more needed and appropriate than in 1987 when many are so bent on imitating a whirlwind, that they almost have a nervous breakdown upon missing a section in a revolving door. The better way is to heed the invitation, "Come unto me and I will give you rest." Then he remakes us, activates us, enables us as we choose correctly – and we will have a life redolent with the fragrance of that life lived in Palestine twenty centuries ago. There is no other way.

**SUMMARY**

What we are is so much more important than what we do. Everything we do is only a reflex of what we are.

Our main duty in life is not to do many things, but to reflect Jesus. The devil destroys some men through their laziness, but other men through their excessive activities.

When Mary sat at the feet of Jesus and learned, she was told she had chosen the good part. If we would sit with Jesus at least every seventh day, it would change the quality of the other six.

Worship and the family are the two pillars of human society. If they go, all else goes.

The practice of worship reflects the reality present throughout the whole of humanity and the entire universe. Adoration is the chief duty of all beings made in the image of God.

**REFERENCE**

1. *Talks to Teachers*, pp. 243-244.
**CHAPTER 50**
Are You a Worry Wart? (Part One)

_Sometimes it's all right to worry, but not usually. The sovereign cure for all the wrong forms of worry is trust in the love of God._

Prayer is a powerful and effectual worry-remover. Men and women who have learned to pray with childlike sincerity, literally talking to, and communicating with the Heavenly Father, are in possession of the great secret whereby they can cast their care upon God, knowing that He careth for us. A clear conscience is a great step toward barricading the mind against neuroticism.

Many are victims of fear and worry because they fail properly to maintain their spiritual nutrition ... The majority of people liberally feed their bodies, and many make generous provision for their mental nourishment; but the vast majority leave the soul to starve, paying very little attention to their spiritual nutrition; and as a result the spiritual nature is so weakened that it is unable to exercise the restraining influence over the mind which would enable it to surmount its difficulties and maintain an atmosphere above conflict and despondency.


As long ago as 1858 Dr. Thomas Watson remarked in a lecture before students and physicians at King's College, London: "Very many diseases have a mental origin. Excessive intellectual toil - domination of violent passion - frequent recurrence of strong mental emotion - vicious and exhausting indulgences, each and all will sap the strength and grievously impair the health of the body; and perhaps there is no cause of corporal disease more clearly made out, or more certainly effective, than protracted anxiety and distress of mind."

Harold Shyrock, M.D., _Happiness and Health_, p. 8.

**Worse Than Cholesterol**

For many, it is a worse health threat than cholesterol. It can weaken your efforts, spoil your sleep and digestion, rob you of joy, and turn your hair gray. Are you a worrier? Is that your problem? If so, you have plenty of company - me, for one.

I recollect the time when as a young man in Lansing, Michigan, I was in doctoral studies. I had academic worries, financial worries, and at times I worried about the health of my two small children. While walking one night, engrossed in my worries, I remembered that I had to preach the next day. I was nearly scared to death when a dog barked out of the darkness. I immediately realized that most barking dogs don't bite, and most dogs that do bite don't bark, so I preached on the topic the next day after having preached the sermon to myself that night.

Is it not true, in your experience, that most of the tragedies that have overtaken you have suddenly swooped down upon you, crept up upon you, without warning? Sometimes these tragedies are things you would never have anticipated. This means, of course, that most of our worries are for naught. You may have heard of the man who said, "There have been a lot of terrible things in my life but fortunately most of them never happened." Ninety-nine percent of the things we worry about never happen.

The great calamities usually come out of a cloudless sky. And that's often true of the good things too. Many of the best things that happen to you and me weren't as a result of our great efforts, they were just the gifts of God. Entirely unexpected.

I suppose for Christians one of the worst aspects of this tendency to worry is that we feel so guilty about it. We've often heard, and it's true, that faith and fear are like oil and water - they don't mix. Does not the Scripture say, "He that feareth is made to tremble" (1 Jn 4:18)? Perfect love casts out fear. Of course, that has to be true coming from the Word of God. But sometimes, perhaps, it's misunderstood, because there is a positive aspect to worry.

Perhaps you've heard of that great Christian writer, F. W. Boreham? Though English by birth, he spent most of his life in Australia. On one occasion he wrote an essay on this topic in which he said:

> Worry is a very good thing in its way. Those who condemn worry in terms that suggest that to worry is to play ducks and drakes with the Ten Commandments, never stop to explain why, if worry be essentially and inherently wicked, we are sent into the world endowed with such an infinite capacity for doing it. Obviously we were made to worry. But we were made to worry wisely. We were made to take life seriously and feel the gravity of things. The man who never worries about his business will never have a business worth worrying about.1

Then Boreham illustrated his theme by talking about the years of World War I, and he spoke about the crisis of that hour when the nation expected its leaders to worry, when it was their binding duty to worry. Had a report gone abroad, that the national leaders were not worrying at all, that would have brought greater consternation than the news of failures in battle.

There are times when it's imperative that a doctor should worry about his patient, an attorney should worry about his case, a farmer should worry about his cattle and his crops. After all, it is through mental stress, the stress that results from failure and discontent, that improvements are devised. If men never worried, things would always go on in the same way. Our wheel would revolve in the same well-worn ruts. Civilization would be stultified by stagnation.

The problem, of course, is that we go to ridiculous excess in our worrying. While it's our duty to worry about the big things, to worry in the sense of being concerned, to do some analytical thinking, to reason from cause to effect in order to make decisions and to act, etc., it is not our duty to worry about trifles.
We tend to worry about everything, too often about the insignificant molehill instead of just the great mountain peaks. And that sort of worry is a fire that burns up the brain. It leads to an exhaustion that can be a fertile source of all disease. Do you know that one person in ten in the USA will have a nervous breakdown mainly caused by worry and emotional conflicts?

You've heard of Dr. Alexis Carroll, the Nobel Prize winner. He said on one occasion, "Businessmen that don't know how to fight worry, die young." That's not only true of businessmen, that's true of all of us. A great physician once said that 70 percent of all patients who come to physicians could cure themselves if they only got rid of their fears and worries. Fear causes worry and then worry causes fear. Worry makes you tense, nervous, affects the nerves of your stomach, and can pave the way for stomach ulcers. One writer once said that you do not get stomach ulcers from what you eat, you get ulcers from what's eating you.

The Wrong Type of Worry Kills and Like All Murder, It Is a Sin

There's both truth and error in this matter of worry, and we need to make the distinction between the two. Christian warnings guard against foolish worry that goes round and round without analyzing the problem and coming to a decision or taking action to repair the situation. That sort of worry is condemned in Scripture. For example, consider the words of our Lord in Matthew 6:25-34:

> Therefore I tell you, do not be anxious about your life, what you shall eat or what you shall drink, nor about your body, what you shall put on. Is not life more than food, and the body more than clothing? Look at the birds of the air; they neither sow nor reap nor gather into barns, and yet your heavenly Father feeds them. Are you not of more value than they? And which of you by being anxious can add one cubit to his span of life? And why are you anxious about clothing? Consider the lilies of the field, how they grow; they neither toil nor spin; yet I tell you, even Solomon in all his glory was not arrayed like one of these. But if God so clothe the grass of the field, which today is alive and tomorrow is thrown into the oven, will he not much more clothe you, O men of little faith? Therefore do not be anxious saying, 'What shall we eat?' or 'What shall we drink?' or 'What shall we wear?' For the Gentiles seek all these things; and your heavenly Father knows that you need them all. But seek first his kingdom and his righteousness, and all these things shall be yours as well. Therefore do not be anxious about tomorrow, for tomorrow will be anxious for itself. Let the day's own trouble be sufficient for the day.

Marvelous words! Gird them to your soul if you are a worrier. Write them out by hand. Read them often. Memorize them. Pray over them. What is our Lord saying? In verse twenty-five he says, "Worry is needless." He asks us, "Isn't life more than food, isn't the body more than clothing?" In the next verse he tells us, "It's senseless." Look at the birds of the air. God looks after those. Won't he look after you? In the following verse he says, "It's useless." We can't add a year to our life by worry alone. It's useless. And in verses 28-30, he says, "It's faithless." We have little faith if we forget that our heavenly Father knows and our heavenly Father cares. And then in verse 32 he says that worry is pagan.

Almost all our worry is about the invisible tomorrow. Dale Carnegie in his excellent book *How to Stop Worrying and Start Living* tells how the most famous physician of the last century in this country, William Osler, had his life changed by reading twenty-one words from Thomas Carlyle. Here are those words: "Our main business is not to see what lies dimly at a distance, but to do what lies clearly at hand." That changed Osler's life. It made him a great physician. Over two-score years later he addressed the students at Yale University. While crossing the Atlantic, he noticed on the great ocean liner, how the captain standing on the bridge, could press a button and with a clanging of machinery, various parts of the ship were immediately shut off from one another, shut off into watertight compartments. So this is what Dr. Osler said to the Yale students before him:

> Each one of you is a much more marvelous organization than the great liner. You are bound on a longer voyage. What I urge is that you so learn to control the machinery as to live with day-tight compartments as the certain way to ensure safety on the voyage. Get on the bridge. See that at least the great bulkheads are in working order. Touch a button and hear at every level of your life the iron doors shutting out the past, the dead yesterdays. Touch another and shut off with a metal curtain the future, the unborn tomorrows. Then you're safe. Safe for today. Shut off the past. Let the dead past bury its dead. Shut out the yesterdays which have lighted foals the way to dusty death. For the load of tomorrow, added to that of yesterday, carried today makes the strongest falter. Shut off the future as tightly as the past. The future is today. There is no tomorrow. The day of man's salvation is now. Waste of energy, mental distress, nervous worries, dog the steps of a man who's anxious about the future. Shut close then the great fore and aft bulkheads and prepare to cultivate the habit of a life of day-tight compartments.

This is wonderful counsel from Dr. Osler for all of us.

One Step at a Time

The grand old hymns of the Christian faith tell us the same story. I have a hymnbook in my hand now and I'm looking at that hymn by John Henry Newman, "Lead Kindly Light." Let me remind you of its first verse:

> Lead, kindly Light, amid the encircling gloom, Lead Thou me on;  
> The night is dark, and I am far from home; Lead Thou me on.  
> Keep Thou my feet; I do not ask to see  
> The distant scene; one step's enough for me.

It should be enough for me too. It should be enough for you.

We're standing this very moment at the meeting place of two eternities. There is the vast past behind us. There's the infinite future ahead of us. We cannot live in those eternities not even for a split second. If we try to do so, we can wreck ourselves physically and mentally. Let's live today. Let's live this hour, this moment. Robert Louis Stevenson was right. He said, "Anyone can carry his burden however hard until nightfall. Anyone can do his work however hard for one day. Anyone can live sweetly,
patiently, lovingly, purely till the sun goes down. And this is all that life really means." "Be the day weary or be the day long, at length it ringeth to Evensong." Sufficient unto the day is the evil thereof.

There are many things for us to remember when we're threatened with worry. First, God himself. When we really believe that God loves us — that he intends our best good, then we will cease to worry so much. We will trust God as a child trusts a loving parent. Our ills and our tortures will disappear, for our wills will be swallowed up in the will of God. What a difference that can make for all of us! Consider Isaiah 26:3: "Thou dost keep him in perfect peace, whose mind is stayed on thee, because he trusts in thee." It can be translated this way: "Thou will keep him in perfect peace whose mind stops at thee, oh God." God lives in the future as well as the present. Nothing ever takes him by surprise. He counts even that fifth sparrow that was thrown in free when men paid two farthings for four sparrows. He attends the funeral of every sparrow. He counts the hairs of our head. Can we not let our minds stop at God? Thou dost keep him in perfect peace whose mind stops at God.

Now let us take a passage from the New Testament which reminds us of how to live. Look at Paul's words in 2 Corinthians 4:16-18. Paul was a man who had unending pressure. Ponder what he wrote:

So we do not lose heart. Though our outer nature is wasting away, our inner nature is being renewed every day. For this slight momentary affliction is preparing for us an eternal weight of glory beyond all comparison, because we look not to the things that are seen but to the things that are unseen; for things that are seen are transient, but the things that are unseen are eternal.

That person to whom the eternities are real is the person who finds it easiest to live in the present moment. When God is real to us, when God is near to us, we will trust him with both past and future and look to him for wisdom and strength and live for the present. Those who see the invisible — they alone can do the impossible.

Recall those famous words found in Genesis 16:13 "Thou God seest me." Many people understand these words to mean that we had better watch what we do for God will punish us. But that is not their intent. These words were first uttered by a poor heathen woman who had been banished from home and family and was wandering aimlessly in the desert. Suddenly, God spoke to her, and she confessed with joy, gladness, and confidence, "Thou God seest me." However worried you are at this moment, God is biding over you in love. You are the purchase of the blood of his Son. He knew you before you were born. All of life's ups-and-downs are meant to prepare you to live with him for eternity. Say to yourself often: "Thou God seest me," which means he sees all our problems, all our perplexities, and all our difficulties. He not only sees, he cares, and he can and will do something about it. Trust him. Blessed is he whose mind stops at God.

The Promises of God – A Shield Against Worry

The promises of Scripture revealing the love of God are the very best protection against unnecessary worry. Take this passage from Romans, chapter 8 beginning at verse 28: "And we know that all things work together for good to them that love God, to them who are the called according to his purpose." "If God be for us, who can be against us?" "He that spared not his own Son, but delivered him up for us all, how shall he not with him also freely give us all things?"

"In all these things we are more than conquerors through him who loved us. For I am sure that neither death, nor life, nor angels, nor principalities, nor things present, nor things to come, nor powers, nor height, nor depth, nor anything else in all creation, will be able to separate us from the love of God in Christ Jesus our Lord."

Paul lists all sorts of threats and then says "no" to all these things. We are more than conquerors through him who loved us. Did you catch his argument? "All things work together for good." Many things are not good in and of themselves, but they can work together for good. There are lots of wheels inside your watch. If you take off the back of your watch and look, you'll see some go one direction and some go the other. But they all work together for good. There are no good painless trials. The Christian is promised that ultimately he will see that all things have worked together for good, and that neither death, nor life, nor things present, nor things to come, that nothing can separate him from the love of God in Christ Jesus our Lord. To be able to claim this promise is far, far better than to be the king of a great country or the wealthiest man in creation.

It's the hard places and the hard situations that make us into the type of people who have learned to trust and obey regardless of the circumstances. There is an old proverb that says, "The north wind made the Vikings" and in contrast another proverb says, "Constant sunshine makes a desert." The Christian isn't promised a life free from pressures and anxieties that cause him to worry. He is promised the assurance that God will not forsake him, the certainty that God will be with him amidst all of life's trials. The Christian is promised that ultimately he will see that all things have worked together for good, and that neither death, nor life, nor things present, nor things to come, that nothing can separate him from the love of God in Christ Jesus our Lord. To be able to claim this promise is far, far better than to be the king of a great country or the wealthiest man in creation.

To have God as your father, heaven as your home, eternal life in the present, forgiveness of sins, to walk in step with the universe, that's worth more than all the world's riches. Believing this, life's trials diminish in significance. There are those, of course, that call for our immediate action, our analysis of the cause and effect relationship existing behind the problem, in order prayerfully and carefully to make a decision, to commit ourselves to action. "Trust and obey, for there's no other way" — so says the old hymn and it is right.

Paul said in this passage that death threatened many, life threatened others, and wicked angels some. But you know, very often, it's the little things that cause us the most concern, not the big things, like impending death. I like the story Carnegie gives of Robert Moore who, in March 1945, was in a submarine under 276 feet of water and around the sub were exploding depth charges. And Moore could say this:

Those fifteen hours of attack seemed like fifteen million years. All my life passed before me in review. I remembered all the bad things I had done. All the little absurd things I had worried about. I had been a bank clerk before I joined the navy. I had worried about the long hours, the poor pay, the poor prospects of advancement. I had worried because I couldn't own my own home, couldn't buy a new car, couldn't buy my wife nice clothes. How I hated my old boss who
was always nagging and scolding. I remembered how I came home at night, sore, grouchy, and I would quarrel with my wife over trifles. I worried about a scar on my forehead, a nasty cut from an auto accident. How big all those worries seemed years ago, but how absurd they seem when depth charges were threatening to blow me to kingdom come. I promised myself then and there that if I ever saw the sun and the stars again, I would never never worry again. Never, never, never! I learned more about the art of living in those fifteen terrible hours in that submarine than I had learned by studying books for four years in Syracuse University.  

Here was a man who learned that troubles are like cannibals. The big ones eat up the little ones. It's not usually the threat of death about which we worry, it's some trifle that concerns our pride, our ego, or our greed. As our sins and follies cease, so will our worries.

SUMMARY

Our worst troubles often come without warning, whereas the ones that threaten beforehand usually don't eventuate. Worry in the sense of responsible concern is right, not wrong, but most of our worries are not of that kind.

Learning to live one day at a time dissolves most of our worries.

For many, worry is a worse health threat than cholesterol.

Scripture says, "He that feareth is not made perfect in love," and worry is a type of fear.

What Dr. Alexis Carroll said about businessmen is true of us all. He said that "Those who don't know how to fight worry die young."

Christ also advised us to live one day at a time.

Scripture says, "Blessed is the man whose mind stops at God" (Is 26:3 orig.) Remember that God is always sufficient and he is always present.

"Thou God seest me" is worth remembering. He sees us in order to provide for us.

Read often the promises of Scripture, such as Romans 8:28-39; Psalm 37, etc.

Remember, the mind can make a hell of heaven or a heaven of hell.

Ninety-nine percent of the things we worry about never happen, but we refuse to believe the statistic, or God!

There is a legitimate type of worry where we take life seriously, feel the gravity of things, and do our duty concerning them. We tend to worry about trifles. It is more painful to sit upon a tack than upon a mountain.

Remember, you do not only get stomach ulcers so much from what you eat but from what's eating you.

Our Lord taught that most worry is needless, senseless, useless, faithless, and pagan. See Matthew 6:25-34.

We stand at the meeting place of two eternities. It is folly to live solely in the past or solely in the future. There are decisions to be made today.

Anyone can carry his burden however hard until nightfall.

When we really believe that God loves us and that he intends our best good, then we will trust him as a child trusts a loving father, and our ills and torments will disappear.

When our will is surrendered to the will of God, we will not find his providences hard to bear.

When God is real to us and we practice his continual presence, we will trust him with past, present, and future.

REFERENCES

1. The Blue Flame, p. 39.
2. How to Stop Worrying and Start Living, p. 2
3. Ibid., p. 56.
CHAPTER 50

Are You a Worry Wart? (Part Two)

A right perspective is the best protection against worry. For one thing, it always takes God into account. Don't pray "Our Father" and live like an orphan.

* * * *

Why are ye fearful, O ye of little faith?
Matthew 8:26

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At the beginning and end of the gospel story, as throughout its pages, we find the admonition "Fear not" (Mt 1:20; 28:5). There are approximately 365 invitations in Scripture to trust rather than to fear – that's one for every day of the year!

* * * *

Don't Sweat the Small Stuff

I remember the time when my wife and I had an apartment in a large house. The owner and his wife were magnificent Christian people. The husband had been at Gallipoli in World War I – an event of terrible carnage for the Australian army. He said to me one day with half a laugh, "I made up my mind at Gallipoli, that if I ever got out of that, I'd never worry about anything again." And he seemed to have kept his promise.

God gave us the capacity for concern, but he meant it to be lavished only upon the big issues of life. The big things that should concern us are duty, faith, hope, and love. Let us not make idols and false gods out of trifles and worship them by excessive concern.

Harry Emerson Fosdick talked about a giant tree and the battles that it had won and lost. He told how ultimately this giant was felled by beetles. Let me read you what he said:

On the slope of Long's Peak in Colorado lies the ruin of a gigantic tree. Naturalists tell us that it stood for some four hundred years. It was a seedling when Columbus landed at San Salvador, half-grown when the pilgrims settled at Plymouth. During the course of its long life, it was struck by lightning fourteen times, and the innumerable avalanches, and storms of four centuries thundered past it. It survived them all. In the end, however, an army of beetles attacked the tree and leveled it to the ground. The insects ate their way through the bark and gradually destroyed the inner strength of the tree by their tiny, but incessant attacks. A forest giant which age had not withered, nor lightning blasted, nor storms subdued, fell at last before beetles.

Can we not learn the lesson? We must not permit our lives to be destroyed by trivia, by the beetles of existence. You have heard of the great giant of the African forests, the elephant. It is immune to attacks from lions, tigers, etc., but it can be destroyed by jungle ants, which creep up into the trunk and drive it crazy. The little things of life can destroy us, too, if we let them, and if we lack a sense of perspective. When we stop to think about it, 90 percent of our life is good, at least for most of us. Why should we direct our attention to that minor part of existence until it becomes the major part and robs the 90 percent that's good, of all its goodness. Isn't that folly?

Centuries ago, John Wesley was staying in the home of an aristocrat. A puff of wind brought ashes from the fireplace onto the floor, and the host said to him, "Wesley, there, there, do you see what I have to put up with?" That was the world where people were having limbs amputated without anesthetic, where millions died of starvation, when more millions were cold every night because they had inadequate clothing. Yet here was an aristocrat complaining because a puff of wind occasionally brought a small cataract of ashes from his fireplace. "I complained because I had no shoes, until I met a man who had no feet."

How important it is to have a right sense of perspective if we are to avoid the follies of unnecessary worry. Children, too, can make mistakes in this area. I remember reading of a small boy who was terribly concerned about his smallness. He was neither big nor strong. Once the family went to the beach. They had never been there in their lives before, and the boy tiptoed to the edge and felt the water. It was cold! "Come on," said his father. "Go into the water. It will make a man of you." The young lad looked at his dad very seriously. "Will it really?" "Of course it will, son, it will make a man of you." The young lad gritted his teeth, made a dash for the water, endured its coldness for several minutes, then rushed to the dressing shed, looked at himself in the mirror and began to cry. He was the same small boy.

Many of us weep because we don't grow as quickly as we want to. Remember that a squash can come up almost overnight, but you don't ever get a forest of oak that way. The best things of life take time and we need a sense of perspective to realize that.

Let's not think that our view of perfection is necessarily God's. In Acts 10, we have the record of how Peter was instructed to rise, kill, and eat the animals of his dream, some of which were unclean. And we have recorded Peter's words in response to the Lord. "Not so, Lord." That was Peter all over. He contradicted God or man if his own sense of rightness was threatened. Could it be that much of our unhappiness, much of our worrying, is because we don't have a true perspective of God's view of things, because we insist on our own, because we're always saying to God, "Not so, Lord, it must be my way?"

Most of the things that happen to us in life have two handles. As a generalization, we can say that nothing that happens is entirely good in itself and nothing that happens is entirely bad in itself. So much depends on which handle we grasp. "Two men looked out through prison bars. One saw mud and the other saw stars."
Napoleon said he had never had six happy days in his life. The great conqueror, the mighty general, the victor of battle after battle—he never had six happy days in his life! By contrast, Helen Keller, blind, deaf, and for a time dumb, said, "I have found life so beautiful." Dr. Reinhold Niebuhr wrote a beautiful prayer that runs like this: "God grant me the serenity to accept the things I cannot change, the courage to change the things I can, and the wisdom to know the difference." If we have a true perspective, we will learn by God's grace to cooperate with the inevitable. We will be willing to have it so, whatever it is, whether it be a pinprick or a cancer. We will put a stoploss on our worries. We will be reconciled to the worst, and we will work from there to improve things, believing indeed that "All things work together for good to them that love God" be it life or death.

**The Battle of the Mind**

It is the attitude of the mind that determines victory in the battle of life. "The mind is its own place. It can make a hell of heaven or a heaven of hell." No one can escape problems, no one can escape troubles and trials, no one can escape threats day by day. Yet, if our mind is fixed on the eternal truths of God—that he loves us, that his power is absolute, that he knows all things, that he cares, that he's made provision for us—then we will be more than conquerors.

Do you remember that story in *The Pilgrim's Progress* where Christian was going up a hill and suddenly heard the roaring of lions, and began to tremble? He feared to go backwards, to be lost, so on he went, and to his joy, he found that the lions were chained. Whatever is in your way just now, whether it be a problem of health, wealth, reputation, or a family problem, believe that the lions are chained, that not one hair of your head can be touched without divine permission and for your good and his glory. That doesn't mean there will be no pain or troubles. It does mean that the pains and troubles that we endure will be those that we ourselves would have chosen could we only have seen things as God sees them.

When John the Baptist was put to death by Herod, Christ's disciples wondered at the wisdom of it. Why didn't Christ work a miracle and get his friend, his cousin, out of that dungeon? Then John could go on with his work and save many souls. Christians need not wonder now. Christ gave a wonderful testimony to the fidelity of John the Baptist. Christ declared that among those born of women there wasn't one greater than John the Baptist. Yet Christ let him die. What a comfort that was to millions in later centuries who were martyred! They realized that God had permitted the death of one whose fidelity he had applauded. They did not need to conclude that they were forsaken of God. They came to understand that the blood of martyrs was the seed of the church. Life may be rough and tough but seen from the right perspective, ultimately we will view it as all glorious.

If ever a man had cause for complaint and for worry, it was Paul, the Apostle. Yet, just prior to his execution, while in prison, he wrote the epistle to the Philippians. In chapter 4:4–7 we read his counsel given at such a tragic hour:

> Rejoice in the Lord always; again I will say, Rejoice. Let all men know your forbearance. The Lord is at hand. Have no anxiety about anything, but in everything by prayer and supplication with thanksgiving let your requests be made known to God. And the peace of God, which passes all understanding, will keep your hearts and your minds in Christ Jesus.

He was waiting for that monster of iniquity, Nero, to order his execution, yet Paul could write a letter where the note of rejoicing is struck. Here is a recipe for overcoming worry. Be anxious about nothing. Be prayerful about everything. Be thankful for anything. Philippians 4:6 says: "Have no anxiety about anything, but in everything by prayer and supplication with thanksgiving let your requests be made known to God. And the peace of God, which passes all understanding, will keep your hearts and your minds in Christ Jesus." The Greek word for "keep" means "defend as with a garrison." Your mind will be garrisoned by the angels of God when you think properly.

The words that follow are also significant. In verse 8, Paul says, "Finally brethren, whatever is true, whatever is honorable, whatever is just, whatever is pure, whatever is lovely, whatever is gracious, if there is any excellence, if there is anything worthy of praise, think about these things." Paul was a happy, trusting, rejoicing, faithful Christian, because he kept his mind on the right things. What about you and me? We are what we think about all day long. Experience is not what happens to us. It's what we do with what happens to us, and that depends upon what we are thinking about most of the time. How can we possibly be cheerful, happy, rejoicing, if our minds are filled with garbage, if we are careless in our selection of what we read, what we see, what we say, what we listen to. WHATSOEVER is true, honorable, just, pure, lovely, gracious, excellent — these are the themes for our contemplation. These things alone can give us the right perspective that will ward off worry.

My favorite verse on this subject is 1 Peter 5:7: "Casting all your care upon him; for he careth for you." When we really believe that God loves us and that he means to do us good, when we see that God is love, then our ills and torments will disappear. Our will will be swallowed up in God's will, and his will is love. One of the smallest sentences in the Bible has the greatest meaning. "God is love." It's difficult to find a briefer sentence. Yet how infinitely vast, how wonderful is the truth that lies within those three words. It's the very center and source of all we need to know about God, and yet it's a truth we're always questioning.

**To Believe That God Is Love Brings Perfect Security**

Most men have believed in the existence of God, atheism being only a modern aberration. Most people believe in God's power and his wisdom. Many vaguely believe he's kind, but there are very few who really think of God as love. Love! If only we could believe it as God has taught. God so loved the world he gave his Son. He not only gave his Son, he gave himself, for God was in Christ reconciling the world unto himself. He not only gave his Son and himself, he gave his Spirit. His Spirit is freely given to all those who obey him. He bankrupted heaven by his love, for are not the angels ministering spirits sent forth to minister to all them that shall be heirs of salvation? God's love is like the sunshine. The sun doesn't only reach the mountain peaks, it can creep down into the valleys. It can cover the meadows with its glory. It kisses the daisy and fills its cup with gold. God's love comes down to the lowest and the least, for God is love.

There is a motto on an old weathercock—"God is love." Someone said, "Do you mean God's love is fickle, changing with the wind?" "No" said the owner of the weathercock, "I mean that whatever way the wind blows, God is love." Whether it's a cold wind from the north or a biting one from the east, a warm wind from the south, or a genial west wind, God is love. It's a stream
that never freezes in winter. It's a fountain that never becomes dry in summer. It's a sun that never sets. We may see the world burning and the stars drop from their orbits. We may see the heavens rolled up like a scroll. Yet God's love lasts forever and ever. If only every person would believe that. If we look long enough at the cross of Christ, we will be convinced of it.

Years ago I read some letters from Spurgeon's wife in his autobiography. In one story she illustrates the love of God. Here are her words:

One ever-recurring question when he [her husband], had to leave me was, "What can I bring you, wifey?" I seldom answered him by request for I had all things richly to enjoy except health. But one day, when he put the usual query, I said playfully, I'd like an opal ring and a piping bull-finch. He looked surprised and rather amused but simply replied, "Aye, you know I cannot get those for you." Two or three days we made merry over my strange choice of desirable articles but one Thursday evening on his return from the tabernacle, he came into my room with such a beaming face that I knew something had delighted him very much. In his hand was a tiny box. I'm sure his pleasure exceeded mine as he took from it a darling little ring and placed it on my finger. "There's your opal ring, my darling," he said. And he told me of the strange way in which it had come. An old lady, whom he once visited when she was ill, sent a note to the tabernacle to say that she desired to give Mrs. Spurgeon a small present. Could someone be sent to her to receive it? So Mr. Spurgeon's private secretary went and brought the little parcel, which, when opened was found to contain this opal ring.

Not long after that I was moved to Brighton, there to pass a crisis in my life, the result of which would be a restoration to either better health or to death. One evening when my husband came from London, he brought a large package with him. Uncovering it he disclosed a cage containing a lovely piping bull-finch. My astonishment was great, my joy was unbounded, and these emotions were intensified as he related the way in which he became possessed of the coveted treasure. He had been to see a dear friend of ours whose husband was sick unto death and she said to him as he left, I want you to take my pet bird to Mrs. Spurgeon. I'll give him to none but her. His songs are too much for my poor husband in his weak state, but I know that this bird will interest and amuse Mrs. Spurgeon in her loneliness when you're away so much.

That's how God loves and he loves you just like that. Therefore, "Cast all your care upon him, for he careth for you" (1 Pe 5:7).

**SUMMARY**

A sense of perspective is very important in case we allow the beetles of life to destroy us, forgetting that 90 percent of life is good.

Most of the things that happen to us in life have two handles, and our happiness, health, and destiny depend upon the habitual way we choose which handle to seize. The prayer of Dr. Reinhold Niebuhr was "God grant me the serenity to accept the things I cannot change, the courage to change the things I can, and the wisdom to know the difference."

Here is Paul's recipe: "Be anxious about nothing, be prayerful about everything, be thankful for anything" (see Php 4:6).

To really believe that God loves us as though we were the only one to love – this puts worry to flight instantly.

**REFERENCE**

Is Loneliness Your Problem? (Part One)

How easy it is for all of us to forget that this place, this moment, "is none other than the house of God, and this is the gate of heaven." (Genesis 28:17).

Many long-term studies of thousands of people have shown strong correlations between social isolation, disease, and death. Those with underdeveloped social networks with such elements as marriage, friendships, and group involvements, have much higher death rates than those with many such relationships. Epidemiologists have shown that the death rate of married people is lower than for singles, divorcees, and widows for many major diseases, as well as suicide, accidents, and drug addiction. Pregnant women with more developed psychosocial assets such as supportive friendships suffer fewer complications than more isolated women.

Kurt Butler and Lynn Rayner, M.D., The Best Medicine, p. 363.

The Threatening Desert

Human beings are like porcupines who love to get together even though it hurts. Sometimes it hurts terribly to mix with our fellow human beings. One character in literature says, "The more I sees of other people, the more I love myself." And Charles Schultz has one of his characters say, "I love humanity, it's people I can't stand." Even Jeremiah the prophet seemed to experience something like that when he wrote in his ninth chapter:

Oh that my head were waters and my eyes a fountain of tears, that I might weep day and night. Oh, that I had in the desert a lodging place, that I might leave my people and go away from them! For they are all adulterers, treacherous men. They bend their tongue like a bow; falsehood and not truth has grown strong in the land; for they proceed from evil to evil. Let everyone beware of his neighbour, and put no trust in any brother; for every brother is a supplanter, and every neighbour goes about as a slanderer. Everyone deceives his neighbour, and no one speaks the truth; they taught their tongue to speak lies; they commit iniquity and are too weary to repent.

There are times when each of us summarizes all other people as being like that, and yet one of the greatest sorrows that can come to anybody is the sorrow of loneliness.

In the very opening pages of Scripture, we have God saying, "It is not good for man to be alone." Is loneliness your problem? If it is, you know that being with a multitude of people is no solution. You can work in a great city with its millions or attend a large school with its hundreds or be in a working place with scores and yet be dreadfully lonely. A multitude of people being near is no protection against loneliness. What is there by way of protection? What can be said about this problem which overtakes all of us at various stages of our existence? What can be offered to help remove the curse of loneliness?

The first thing to be said is that in reality none of us is ever really alone. To understand that will take much of the sting out of loneliness. Let me illustrate:

You have heard of the great Antarctic explorer, Sir Ernest Shackleton. You may remember that he had about twenty-five men on board his vessel, the Endurance, when it sank. With two other men in an open boat, he went to find rescuers for the twenty marooned men that he left behind. Here's Shackleton with two others in a twenty-footer, an open boat, and they traveled over 800 miles of storm-swept sea. Then they crawled and clambered over dizzy peaks and over slippery glaciers trying to find help. Think of it – this lonely voyage on a polar sea. Think of the intrepid climb over those unchartered ranges. At a banquet in his honor in London, when people expected him to talk about the heroism of the event, he didn't. He talked about something else, and this is what he said. "When I look back upon those days with all their anxiety and peril, I cannot doubt that our party was divinely guided both over the snow fields and across the sea. I knew that during that long andracking march of thirty-six hours over the unnamed mountains and glaciers it seemed to me very often that we were not three but four. I said nothing to my companions on the point but afterwards, Worsley, one of the other two, said to me, 'Boss, I had a curious feeling on the march. There was another person with us.' And Kreen, the other member, confessed the same.”

We are never less alone than when we feel dreadfully alone. I speak not only to the bereaved, but I speak to many that are yet in the bonds of matrimony. Many a lonely wife thinks her husband doesn't understand her. Many a lonely husband thinks his wife doesn't understand him. Many a lonely child is convinced of the same regarding his parents. But we are never less alone than when we think we are alone. Shackleton's experience is only an echo of the experience of every Christian.

Christ's Promise Is: "I Will Never Leave Thee"

From the age of nine, in the mercy of God, I have sensed the presence of God. It has often been clouded by my sins and by my unbelief, but I remember the new life that came at that age because of the gospel. Some of you have known that presence much longer than I. When Shackleton went on his last voyage, though renowned for traveling light, he took with him a gramophone and the famous record of Dame Clara Buck singing "Abide with Me." Can you think of what it must have been like when across those ice-bound wastes of the Antarctic there rang out the words:

I need Thy presence every passing hour;
What but Thy grace can foil the tempter's power?
Who like Thyself my guide and stay can be?
Through cloud and sunshine, O abide with me.
I fear no foe, with Thee at hand to bless;
Ills have no weight and tears no bitterness;
Where is death's sting? where, grave, thy victory?
I triumph still if Thou abide with me.

There is simply no blessing like the blessing of the constant awareness of the presence of our heavenly Father – One who for Christ's sake has accepted us just as we are with all our sins, failures and weaknesses, One who does not see in us the likeness of the sinner but the likeness of his Son in whom we believe, One who is always for us and never against us. There is no blessing in all the world like the awareness of the presence of that One. Even a heathen king got a glimpse of it on one occasion when he persecuted the Hebrew worthies and threw them into the burning fiery furnace. Suddenly he stood up amazed and confounded and said, " Didn't we throw in three? But I see four men in the furnace, loose, walking. And the form of the fourth is like the son of God." See Daniel 3:24-25.

There was another vessel in the frozen wastes of the Arctic. This time it was Sir John Franklin, and he was less fortunate than Shackleton and his crew. Franklin and all his men perished. The would-be rescuers came too late. Long, long after, they found the boat, bones, and Bibles. That's all that was left. They put the Bibles in a museum and interestingly enough they found that a certain passage had been heavily underlined in one of those Bibles. From Psalm 139, one of Franklin's men had underlined this passage: "Whither shall I go from thy Spirit? Or whither shall I flee from thy presence? If I ascend to heaven, thou art there! If I make my bed in Sheol, thou art there! If I take the wings of the morning and dwell in the uttermost parts of the sea, even there thy hand shall lead me, and thy right hand shall hold me." "If I take the wings of the morning and dwell in the uttermost parts of the sea..." And so these men had died in the awareness that wherever they were, God was there too. It made even death the sweeter.

Beware of These Heresies!

There are lots of heresies that don't matter very much in a practical sense, but there are two heresies in this area that matter very much. At the beginning of the Bible you have Adam saying, "I was afraid and hid myself" – the heresy that God was there but not here. When you turn the page you have Cain saying, "Don't send me away, because I'll be away from your presence." He thought God was here and not there. These are two terrible heresies. God is there, in the high heaven, or within the church with that good man, that good woman, but he's not here, not with this sinner. That is a terrible heresy. The truth is – Christ goes to be guest with him or her that is a sinner. He's always here. Then the other heresy says, well, he's here but not there, if I go yonder, he can't come with me. The truth is he is willing to travel with us wherever we go.

While lots of heresies don't matter, these particular ones have very practical impact. The heresies we oppose should be those that take away peace, joy, gladness, and the willing service and obedience of the believer. Do you remember that Jacob was a victim of one of these heresies? He was out in the desert alone, missing mother's apple pie, missing the family, and the local friends. With a stone for a pillow, he dreamed in his loneliness, and to his amazement a ladder was let down from heaven, and he saw the angels of God ascending and descending. In joy, Jacob awoke and said, "Lo, God is in this place and I knew it not. This is the gate of heaven." It became Bethel, the house of God. See Genesis 28:16-17.

Every place is Bethel, every place has the foot of the ladder, for Christ is the ladder, and the incarnation of Bethlehem was a fitting symbol of the way he is always coming down to us. He meets us in our need wherever we are. We are never really alone. There is Someone who loves us, Someone who died for us, Someone who gives us his Spirit, gives us his righteousness, and sends his angels to minister. We are never less alone than when we think we are alone. God says to us in Isaiah 43:2 "When you pass through the waters, I will be with you, and through the fire, it shall not kindle upon thee." He has not promised that it will always be easy. There will be floods, but he promises they won't drown us. There will be fires, but he says they won't devour us. There will be valleys of the shadow of death, but we will pass through the valley of the shadow of death and learn that shadows can't hurt us. Most of the things we fear are shadows. And loneliness is a situation of fear. We fear it's always going to be as sad and tragic as at this moment and perhaps much worse. But that fear is a shadow, it's not reality. "Yea, though I walk through the valley of the shadow of death, I'll fear no evil, for thou art with me." He's always with us.

There is a classic called Scapegoat written by Sir Hall Caine that speaks of little Naomi. She was blind, deaf, and dumb. Her mother had died. She lived with her father who was an alien in a foreign land. Often in the night, the father would awake to find this tiny figure in her white nightgown standing by his bed. Night and day were the same to her. She didn't know why she came, except she wanted to know that he was near. Likewise, there is Someone who loves us who is always near.

Centuries ago, there was a monk by the name of Brother Lawrence who worked in a Carmelite monastery. He was a very clumsy man. I'm sympathetic with him because I'm a very clumsy person myself. He was the cook and it is dangerous to be clumsy as a cook. He was always dropping things. It didn't matter if the dish was empty, but it wasn't always empty. He became discouraged. One day he was wondering through the Black Forest in Germany. He had left the monastery for an hour and it was the middle of winter. There was snow everywhere around, and gaunt trees without leaves. Suddenly he thought, "These trees that look so dead -- the power of God is here, for they shall burgeon and leaf. They will be green again. Things are not what they seem. God is present. Shortly as winter goes and spring comes, the whole forest will be transformed. God is not dead. God is alive. God is here." From then on he began to practice the presence of God. He wrote a little book about it, one of the greatest little books ever written. You can read it in about twenty minutes. The Practice of the Presence of God is the title. Brother Lawrence came to believe that whatever he did in the monastery, he did in the sight and presence of God. He came to realize that even when things went wrong God was there loving him, accepting him, just the same. When he was faced with a new duty, God was there to help with it. When there was a new joy, he could thank God for his presence. When there was pain or sorrow, he was not left alone to bear it.

There is an Australian grave that holds the remains of John G. Paton, that famous missionary of the South Seas. He grew up in Scotland, and in his autobiography, he tells of the little cottage which had a tiny room where his father went every day to pray. John and the sisters would notice that when the father came out, there was a light on his countenance that the world
could not understand, but they understood it. They knew it was a reflection of the Divine Presence, that presence in which his life was lived. He walked with God. John, from a boy, said: "If my father walked with God, why may not I?"

He went to the South Seas with his young wife in 1858, but three months later he dug the graves, himself, for her and their little baby boy. He wrote:

I was stunned. My reason seemed almost to give way. I built a wall of coral around the grave and covered the top with beautiful white coral, broken small as gravel and that spot became my sacred and much frequented shrine during all the years that amidst difficulties, dangers, and death I labored for the salvation of the savage islanders. There I claimed for God the land in which I had buried my dead with faith and hope.1

Why could he say faith and hope? Because his favorite text was his father's text. "Lo, I'm with you always, even unto the end of the world."

Just a few years after the death of his wife and his little boy, the whole island of Tanna became convulsed. Wild, frenzied cannibals threatened John G. Paton. He hid in a large chestnut tree all night watching the cannibals beating the bushes in their wild search for him. And this is what he wrote about the experience:

The hours that I spent in that chestnut tree still live before me. I heard the frequent discharge of muskets and the hideous yell of the savages, yet never in all my sorrows did my Lord draw nearer. I was alone yet not alone. I would cheerfully spend many nights alone in such a tree to feel again my Saviour's spiritual presence as I felt it that night.2

On the Australian tombstone of this mighty missionary, who lived to be eighty-three, are the words, "Lo, I am with you always, even unto the end of the world." I am with you always. You can paraphrase it, "I am with you all the days, the good days, the bad days, the mad days, the dazed days, the blue days, the black days, the shiny days, and the glorious days. I am with you all the days, even unto the end."

Christ's Promise Is the Word of a Gentleman – It Can Be Trusted

There is a book by Edna Lyle, called *We Too*. It speaks of Erica, the daughter of a skeptic, who had been taught from infancy to despise all holy things. She found as she grew older that she couldn't live on denials and negations, and so at last one day she prayed, "God, if you're there, help me to know you." In the course of business, she had to go to the British Museum. She noticed, under the glass, Livingstone's open diary, and she read the lines quoting John G. Paton's favorite verse, "Lo, I am with you all the days, even unto the end of the world." She also read what Livingstone had put alongside that text. "It is the word of a gentleman of the strictest and most sacred honor." It was like God's great sunrise for Erica as she sensed she didn't have to live alone. The blessing is for all who believe. God is nearer than breathing. He is closer than hands and feet. Bow your head and thank him.

The book of Psalms is full of this thought. While we find in Psalms that the heathen cry out to the believer, "Where is your God?" we find other passages such as Psalms 46:1: "God is our refuge and strength, a very present help in trouble." Psalm 125:2 says "As the mountains are round about Jerusalem, so the Lord is round about his people." So there is God, he is around me to protect me. In Deuteronomy 4:39 it says, "God is in heaven above and on the earth beneath." He is above me to watch over me and on earth beside me to care for me. In Deuteronomy 33:27, it says, "The eternal God is your dwelling place, and underneath are the everlasting arms." He is not only above me, and beside me, he is beneath me to hold me up. In Exodus 13:21, it says, "And the Lord went before them by day in a pillar of cloud and by night in a pillar of fire, to give them light, that they might travel by day and by night." Where is God? He is going before us. He is always there. Isaiah 41:10 says, "Fear not, for I am with you, be not dismayed, for I am your God; I will strengthen you, I will help you, I will uphold you with my victorious right hand." He is with us to sustain us. His face is shining upon us according to Psalms 67:1. Psalm 33:18 says that "His eyes are upon us to guide us." Psalm 34:15 affirms, "His ears are open to our prayers," and in Psalm 145:18, we are told that God is near us to comfort us.

How can we take practical steps to experience the presence of God? Here are some suggestions: First, we need to form the habit of the morning watch. No musician goes and plays for a professional concert and then comes home to tune up. But many a person lives his day and leaves his devotions for the end of the day. If you are like me, you are good-for-nothing at the end of the day, neither good for God nor man. The morning watch is the most important part of the day. I do not believe anybody can live a Christian life without giving God at least enough time at the beginning of the day that he might become more real than anything else that might happen in the following hours.

It is more important, perhaps, to read a passage of Scripture six times than to read a passage six times as long. It is not how much Scripture you read, it is what you remember when you get up from your knees and walk away. How much do you remember? How much sticks with you? Has God become more real than the problems of the day? Strangely, people expect much Scripture you read, it is what you remember when you get up from your knees and walk away. How much do you remember, he meant performance, obedience. It is impossible to feel the loving presence of God if we are in knowing disobedience to his will. Obedience never buys salvation, but you can lose salvation by a course of willful disobedience.

Third, practice the habit of ejaculatory prayer. What does that mean? God doesn't measure prayers by their length. He doesn't measure them by their number. He measures them by their intensity and sincerity. The real prayer life is not a prolonged time upon one's knees but the habit of speaking to God briefly about everything. Whatever you are doing, with eyes wide open, you can speak to him about anything that worries or distresses, that rejoices, that perplexes. The habit of ejaculatory prayer is a
very precious habit, and it is absolutely essential if we are to feel and know the presence of God. How dare we ignore the greatest, the most august, the most wonderful of all presences! How dare we ignore him! If we know him, we should be speaking to him continually about everything.

Fourth, repeat his promises continually. When you read Scripture and find something that touches your heart, form a good habit and write it out several times. Put it in your pocket or purse, and carry it with you. Read it during the day. Let the words of Christ become permanent possessions of your soul. Then the Spirit will bring them to remembrance when most needed. Repeat his promises continually.

Fifth, seek to serve and to share. David Fink wrote a magnificent book called Release from Nervous Tension. Observe what he says on one of the last pages. "A person with an attitude of seeking only to serve, cannot be nervous." When you are lonely you are also nervous. Unless you are happy, you cannot be healthy in mind or soul. But a person with the attitude of seeking only to serve cannot be nervous. He has nothing to lose, no aggression can arouse a hostility that he must repress. Losing himself, he finds himself. Servant of all mankind, he knows no master. It's a strange thing, but that which you and I most want can only be found by looking for something else. All happiness is a by-product, like coke (the fuel, not the drink). If you search solely for it, you never find it. When a person, instead of going out to look for something to assuage his or her feelings, goes out to share and to give, he suddenly finds that all his own needs are met.

Finally, worship regularly with other believers. Worship is tremendously important. We read of Moses, "He wist not that his face shone." Then we read of Samson, "He wist not that his great strength departed from him." When Samson was with God he had great strength. When Moses went in to see God, his face shone with beauty and strength. For glory, and for might, we need the experience of being with God. There is no substitute for that. Worship with other believers and worship regularly. The coal removed from the fire will go out very speedily. We need each other. We are members one of another, and in finding ourselves we find God, and in finding God we find each other.

In summary, to avoid loneliness, practice the presence of God. Read the Scriptures, keep the morning watch, ask God to incline your will to obey, learn to pray, repeat his promises, seek to serve and to share and worship with others. Your loneliness will flee away.

SUMMARY
The Scriptures declare that it's not good for man to be alone. While we may often lack human companionship in this life for a period, we need never lack the divine companionship.
The records of Christian biography are full of men and women who appeared lonely yet who rejoiced in the presence of God. One of the worst of heresies is the belief that God is distant.
The habit of spending the morning watch with God prepares one to live each day in his company.

REFERENCES
2. Ibid., p. 183.
CHAPTER 51
Is Loneliness Your Problem? (Part Two)

To know always that God is enough is to be secure against loneliness.

O Lord, thou hast searched me and known me!
Thou knowest when I sit down and when I rise up;
thou discernest my thoughts from afar.
Thou searchest out my path and my lying down,
and art acquainted with all my ways.
Even before a word is on my tongue,
lo, O Lord, thou knowest it altogether.
Thou dost beset me behind and before,
and layest thy hand upon me.
Such knowledge is too wonderful for me;
it is high, I cannot attain it.

Whither shall I go from thy Spirit?
Or whither shall I flee from thy presence?
If I ascend to heaven, thou art there!
If I make my bed in Sheol, thou art there!
If I take the wings of the morning
and dwell in the uttermost parts of the sea,
even there thy hand shall lead me,
and thy right hand shall hold me.
If I say, "Let only darkness cover me,
and the light about me be night,"
even the darkness is not dark to thee,
the night is bright as the day;
for darkness is as light with thee.
How precious to me are thy thoughts, O God!
How vast is the sum of them!
If I would count them, they are more than the sand.
When I awake, I am still with thee.

Psalms 139:1-12, 17-18 RSV

The Search for the Womb

Let us think about the basic cause of loneliness. Did you know that your birth was the most traumatic and dangerous thing that ever happened to you? At birth, we were separated from the womb – that place of warmth, that place of protection, that place of perfect adequacy.

Through all our years, we experience a search for things and for people that will make us feel as comfortable as we were before we were born. Here is the root of all loneliness, the root of all fear. God intended that the lack in our hearts should lead us to him, but we are often cheated by life. We substitute things for the Creator, people for the Redeemer. The world in one sense is a deception.

Scripture says, "He has set eternity in their hearts." Toss all that the world has to offer into the human heart and there is still a great void there, because we were made for God. Only he can satisfy the heart. Read the book of Ecclesiastes about Solomon's search for happiness and all the things that he tried, and then his ultimate conclusion: "I hated life." He found that this world is a hemisphere without heaven. Life is incomplete without God. Solomon concluded that all upon the earth was vanity and vexation of spirit.

Loneliness is but a reflection of the emptiness that belongs to all of us until we find God. This doesn't mean that it's wrong to seek human companionship. Scripture declares it is not good for man to be alone, and God gave us the desire for human companionship. But it was only meant to be a mirror of the divine companionship which is primary.

The greatest answer to loneliness is the discovery that God is enough. When we make that discovery, God will grant us the secondary thing, human companionship. Did you know that the really loving person is never lonely for long? But we only become loving by seeing the love of God. Scripture says, "My soul, wait thou only upon God, for my expectation is from him. He only is my rock and my salvation. He is my defence. I shall not be moved. In God is my salvation and my glory. The rock of my strength, and my refuge, is in God" (Ps 62:5-7). This is the last and the greatest lesson that anyone can learn – the fact that God and God alone is enough for all our needs. This is the lesson that all God's dealings with us throughout the whole of life is meant to teach. This is the crowning discovery of our whole Christian life. God is enough. If we are going to solve the problem of loneliness, we need to keep in mind that primary truth of Scripture found in Matthew 6:33: "seek ye first the kingdom of God and his righteousness and all these things shall be added unto you."
Hannah Whitall Smith, that old Quaker lady, wrote a beautiful book called *The God of All Comfort*. On page 243 of that book she quotes George McDonald:

> We look upon God as our last and feeblest resource. We only go to him when we have no where else to go. Then we learn that the storms of life have driven us not upon the rocks, but unto the desired haven.

And Hannah Whitall Smith continues by saying this:

> No soul can be really at rest until it has given up all dependence on everything else and has been forced to depend on the Lord alone. As long as our expectation is from other things, nothing but disappointment awaits us. Feelings may change and will change with changing circumstances. Doctrines and dogmas may be upset. Christian work may come to nothing. Prayers may seem to lose their fervency. Promises may seem to fail. Everything we believed in or depended upon may seem to be swept away and only God is left. Just God, the bare God. Simply and only God.

> We say sometimes, if I could only find a promise to fit my case, I could then be at rest. But promises may be misunderstood or misapplied. And at the moment when we are leaning all our weight upon them, they may seem utterly to fail us. But the Promisor, who is behind his promises and is infinitely more than his promises, can never fail nor change. A little child does not need to have any promises from its mother to make it content. It has its mother herself and she is enough. Its mother is better than a thousand promises. In our highest ideal of friendship, promises do not enter. One party may love to make promises just as our Lord does, but the other party does not need them. The personality of lover or friend is better than all their promises and should every promise be wiped out of the Bible, we would still have God left and God would be enough.

> Again I repeat it, only God, he himself, just as he is without the addition of anything on our part, whether it be disposition or feelings or good works or sound doctrines or any other thing either outward or inward, God only is my rock and my salvation. He is my defense. I shall not be moved.

Later on in the same chapter, Hannah Whitall Smith adds these words:

> I believe it is the secret of permanent deliverance from all the discomfort and unrest of every Christian life. Your discomfort and unrest arise from your strenuous but useless efforts to get up some satisfactory basis of confidence within yourselves. Such for instance is what you consider to be the proper feelings or the right amount of fervor or earnestness or at least, if nothing else, a sufficient degree of interest in spiritual matters. And because none of these things are ever satisfactory, and may I tell you, never will be, it's impossible for your religious life to be anything but uncomfortable. But if we see that all our salvation from beginning to end depends on the Lord alone, and if we have learned that he is able and willing to do for us exceedingly abundantly above all that we can ask or think, then peace and comfort cannot fail to reign supreme.

> Wonderful words! True words! God is enough! Do not think when you see that, that you will be cheated of anything or anyone. God knows you need human companionship too. He made you for it. He will bring it to pass, but in the right order. No human friend can satisfy the heart unless we know God first of all. "Seek ye first God." However empty we may seem, however nothingness fills the soul, once we have God, all is changed.

**What God Can Do with Nothing**

Let me tell you a humorous story. It was on the sudden death of the chaplain of Frederick the Great that another candidate was asked to be considered. So he was told to go to the royal chapel and to preach an impromptu sermon from a text that he would find in the pulpit on arrival. When the critical moment came and the preacher opened the sealed packet on the pulpit, he found the card therein was blank. Not a word. With a calm smile he cast his eyes over the congregation and said, "Brethren, here is nothing. Blessed is he whom nothing can annoy; whom nothing can make afraid or swerve from his duty. God from nothing made all things. Scripture says that he hangs the world upon nothing." He got the job. It was because he had God that he could make nothing enough. Can you?

Let me share with you some words from a man who had every right to be lonely. They are the last words that Paul, the apostle, ever wrote: "For I am already on the point of being sacrificed; the time of my departure has come. I have fought the good fight, I have finished the race, I have kept the faith. Henceforth there is laid up for me the crown of..." (2 Ti 4:6-8). You can sense the triumph in this declaration. And yet, look at the situation. Verse 10: "Demas, in love with this present world, has deserted me... Crescens has gone to Galatia, Titus to Dalmatia. Luke alone is with me." And further down in the same chapter, verse 16, "At my first defense no one took my part; all deserted me. May it not be charged against them! But the Lord stood by me and gave me strength to proclaim the message fully, that all the Gentiles might hear it... The Lord will rescue me from every evil and save me for his heavenly kingdom. To him be the glory for ever and ever." Not long after that Paul was decapitated by Nero.

Contrast the last moments of that murderer, Nero, the mad emperor of Rome. Nero was a jaded old man at thirty. He died at thirty-one. Matthew Arnold tells us how Nero desperately tried to fill in his slow, tedious hours. "He made a feast, drank fierce and fast, and crowned his hair with flowers, but no easier nor no quicker passed the impracticable hours." Nero's heart was empty, and all that the Roman Empire could offer him to fill it failed. He came to the long, slow agony of a shameful death. Pagan tribes were pressing the empire. Generals were deserting. Soldiers who guarded his own palace forsook him. Nero sent for advice to his friends, but there was no answer. He went to their houses; the doors were shut. Every door was closed against him in Rome. Not a single response was made to his appeals. He almost went mad with misery while he was knocking at the doors of his so-called friends. The attendants and slaves of his palace plundered the palace and then fled.

We see Nero ultimately in beggar's disguise leaving the gorgeous scene of his iniquities. With him are just his secretary and one unhappy favorate. It is the anniversary of his murder of his wife. He had murdered his mother as well and, of course,
thousands of others including many Christians. We see him now threading his way through the woods and ultimately sinking in a mire, trying to find refuge.

Finally, Nero hides in the hut of a slave; and here he receives the message that he has been pronounced a public enemy of Rome, and that he should be punished after the fashion of his ancestors. What was that? It would mean stripping him naked, thrusting his head into the opening of a forked gallows, and then beating him to death with rods.

Nero was urged by his associates to suicide but he lacked the courage. He cried out angrily, "Won't one of you kill himself and show me how to die?" What abject selfishness! At last he says, "Nero, Nero this is infamy. Come rouse thyself; be a man." But he couldn't do it. He was a vicious, babyish, self-indulgent, overgrown, corrupted boy. His soul was steeped through and through with selfishness, vanity, and crime. The man within him was dead. Only the cowardly animal survived. He placed a dagger against his throat, and Epaphroditus, his secretary, with one thrust drove it home.

Nero was just thirty-one. He had had all the world at his feet, yet he was infinitely lonely. Paul was about to die, but infinitely triumphant. What made the difference? One had God. However your life may seem, if you will lay hold on God, your life will be transformed. Loneliness will flee. In God's good time he will give you an abundance of human friends also, but first that friendship which surpasses all others.

Examples from Scripture

God is always sufficient. See Israel throw themselves on the burning sands in desperation after tasting the bitter waters of Marah. Then God opened the eyes of Moses and chose him a branch which, when cast into the waters, made them sweet. See also the prophet Elisha in the besieged city and with him a young man who cries out, "Alas, my master, what shall we do?" The prophet says, "Fear not, those that are with us are more than they that be with them," and he prays, "Lord, open the young man's eyes." Suddenly the young man sees around the mountains the chariots of God; the chariots of heavenly angels defending the Lord's people.

Do you see it? We are never really alone. We may seem to be drinking only bitter waters like Israel at Marah. We may seem attacked on every side like Elisha and his servant, but God is always enough.

Our Lord Jesus on his last night said to the disciples, "I will pray the father and he will give you another comforter. I will not leave you orphans; I will come to you." The third member of the Godhead, the Holy Spirit, is as verily on earth with us today as the Lord Jesus was in the days of his flesh with his disciples. The Spirit of God is everywhere present. If we pray to the Father; if we read the Scripture; if we think upon the cross, that Spirit will come to our hearts with joy, with peace, with assurance, with a song, with gladness, with wisdom.

God has not left us alone. That famous Cambridge cricketer, C. T. Studd, in the African jungle was once having much trouble with his teeth. He only had a few left. He was living on slops. The natives said, "Bwana, you ought to go home and get your teeth seen to." He said, "If God wants me to have some new teeth, he can just as easily send me some here." His associates took it as a joke and laughed, but a few months later a dentist in England wrote to the committee and offered his services for the heart of Africa. The committee refused him, but he went just the same. He bought a passage to the mouth of the Congo and then set off by himself. It was only a matter of months before he was working on the teeth of C. T. Studd.

God knew when a servant of his wanted teeth in Africa. Doesn't he know your needs also, your need of human friendship? Get to know God better. Love like him. Remember, the loving heart is never lonely for long. Our great need is to see and believe the love of God. That is the key to the malady of loneliness.

SUMMARY

A person with an attitude of seeking only to serve cannot be nervous or lonely.

The person who is willing to be servant to all mankind knows no master except Christ.

Only in finding God do we find each other.

The greatest answer to loneliness is the discovery that God is enough. When we make that discovery, he usually grants us the secondary thing, human companionship.

It is a very rare thing, indeed, for the really loving person to be lonely for long.
CHAPTER 52
The Delays of Love (Part One)

The hardest thing to do in life is to wait. In order to teach us to trust him, God trains us by many waiting experiences. He wants us to learn to trust him where we cannot trace him, to believe him even when we cannot see him. The story of the death and resurrection of Lazarus has deep meaning for each of us as it shows God’s purposes in his delays of love.

* * *

The Lord is good to those who wait for him, to the soul that seeks him. It is good that one should wait quietly for the salvation of the Lord ... For the Lord will not cast off for ever: but, though he cause grief, he will have compassion according to the abundance of his steadfast love; for he does not willingly afflict or grieve the sons of men. The steadfast love of the Lord never ceases, his mercies never come to an end; they are new every morning; great is thy faithfulness ... Thou didst come near when I called on thee; thou didst say, "Do not fear!"

Lamentations 3:25-26; 31-33; 22-23; 57

* * *

"Though the vision tarry, wait for it." Habakkuk 2:3

* * *

Lie Is Never Easy

Franz Kafka pictures a man whose life is suddenly invaded by government officials. He finds himself facing problems for which he doesn’t feel at all responsible. Again and again he goes to the authorities to try and have this thing teased out. Why all these problems? What is the charge? Is he not innocent? Why all this trouble? But he can never find satisfaction or explanation. He can never find the meaning of his troubles. The story closes with this troubled, harassed man looking towards the government building. Suddenly he sees a figure leaning out from an upper story with arms outstretched. He wonders, "Is that God?" "Has he a message of truth, of love, of comfort?" "What does it mean?" And the story ceases.

Kafka is a European novelist whose books have great appeal to many because they picture the enigmatic nature of existence – as some would say, "the hell of existence." All his stories picture life as overwhelmingly difficult. He is trying to say that life, particularly in this twentieth century, is problematic to say the least, that life for many people at times is sheer agony and hell. From the moment you and I are born, from the moment we leave the womb, everything we do or say or think is an endeavor to get back there. You and I from the time we emerge into this world with all its pressures are longing for the warmth, the comfort, the easy, the sufficiency of our mother's womb. It had no rough edges. But life is full of rough edges. But life is full of rough edges. We have to meet with people. They are our joy and our pain. It is impossible to mix with people without running into rough edges.

Only the Bible with its emphasis on faith, hope, and love, has the full truth about psychosomatic medicine. A broken heart can mean a broken life and bring death. Scripture says, "A cheerful heart is a good medicine, but a downcast spirit dries up the bones" (Pr 17:22). The Old Testament speaks about God appearing in a thorn bush to Moses. That's tremendously encouraging. All of us are seen by some people as thornbushes. So life can be rough. It can be rugged as we strive to find the comfort, the warmth, the acceptance, the ease of the womb. But life is not like a womb, and neither is God.

Every Christian would like to believe that God is as harmless as a koala bear, as yielding as Santa Claus or Father Christmas, as warm, as sufficient, as painless as the mother's womb, but he is not. In the beginning we were ejected from a place of security because God wanted us to grow. He wasn't content with us being just a mass of cells that were not contributing. So we were thrown out into the cold, into a hard and often cruel world in order that we might grow, in order that we might bring forth fruit. God is frequently doing that to us.

There is not a Christian who hasn't prayed for years for certain things that God has not granted. We all have desires we think legitimate, in harmony with the will of God, yet God seems to ignore our requests. We all have burdens we would like lifted – maybe connected with health, maybe with the family. It could be something to do with our lifework, some thorn in the flesh which we beseech the Lord each hour to lift, and he apparently does not.

In the first verses of John 11, we read a story that casts light on our predicament:

Now a certain man was ill, Lazarus of Bethany, the village of Mary and her sister Martha. It was Mary who anointed the Lord with ointment and wiped his feet with her hair, whose brother Lazarus was ill. So the sisters sent to him, saying, "Lord, he whom you love is ill." But when Jesus heard it he said, "This illness is not unto death; it is for the glory of God, so that the Son of God may be glorified by means of it." Now Jesus loved Martha and her sister and Lazarus. So when he heard that he, (Lazarus), was ill, Jesus stayed two days longer in the place where he was. Then after this he said to the disciples, "Let us go into Judea again."

What a strange story! "Lord, he whom thou lovest, is ill." And Jesus said, "Yes, so let's stay here." And the record says that he said it because he loved them so much. Here is the mystery of divine delays, the mystery of protracted pain for people whom Jesus loves. You will notice in the very first line that Christians should never think that if they are Christians they will never have any troubles. If that were true, no Christians would die, no Christians would get gray hair or need false teeth or spectacles. And who wouldn’t want to be a Christian, under those conditions?

A certain man was ill. "He whom thou lovest is sick." If Hezekiah could get ill, if the thief on the cross could suffer the agony of his legs being broken after being promised Paradise, if Job, the most perfect man in the East, could be covered with boils from head to feet, if Lazarus, whom Jesus loved, was ill, we should never find it strange that affliction is inevitable for all believers. Life is not a warm comfortable womb. Life is a growing place and we grow best in pain. I grumble continually when things are
not as I want them to be. But God is trying to teach me that the easy way is not the Christian way. "He whom thou lovest is
sick." So when Jesus heard that Lazarus was ill, he stayed where he was – two days longer.

The Pagan Way and the Christian Way

There are two different ways of looking at life. One is pagan and one is Christian. The pagan way of looking at life is that it is
here to minister to my selfishness. The other is that life is a school that will teach me to be unselfish. If suddenly you get a
government message that says you must be at a certain place at a certain time, and you don't know what it's all about, what
you expect will have tremendous impact on your ultimate reaction to what you find. It would make all the difference when you
get a sudden message to go to a strange place whether you expect to find a prison or a hotel.

Suppose you feel, "Well, a person of my caliber, no doubt, is being invited to a luxurious hotel." If you get there and the
luxuries are not there, you will be tremendously disappointed. Your pride will be deflated. But suppose on the other hand you
think back about some of the things you have done, maybe unpaid taxes, and you are expecting a prison. When you arrive
and find it's not a luxurious hotel, it is still a lot better than a prison. You see, everything depends upon what you expect. And
Scripture, contrary to many modern teachings, does not promise that the way to heaven is paved with roses. Life is a school of
discipline wherein the colors are black and blue. It's a university of hard knocks and the school song is "Ouch." Only faith
in Christ can enable us to graduate with honors.

In the story of the raising of Lazarus we have an example of true prayer. The sisters sent a message, "Lord, he whom you love
is ill" – no demands, no lengthy petition. The strongest prayers are often the briefest. They are more likely to be intense. "Lord,
remember me when thou comest into thy kingdom." "What must I do to be saved?"

Scripture has many such brief prayers because God measures our prayers not longitudinally by their length, not
mathematically by their number, but by their intensity. So the sisters give us a model of prayer. Prayer doesn't place us on the
throne. God is not ideally and primarily our servant, though he ministers to us continually. Prayer doesn't make us into God.
The Christian never has any right to make demands on God. His place is to petition, invoking God's love and his knowledge of
what is best. That's all the sisters did. "Lord, he whom thou lovest is ill." They didn't even say, "Come and heal him."

You should observe that the text does not say, "Lord, he who loves you is ill." It's a great mistake in the Christian life to focus
on our attitude towards God. You never grow by that. Our attitude towards God is never just right. Our hope, our inspiration, is
God's love for us. "Let me no more my comfort draw from my feeble hold on thee, in this alone rejoice with awe, – Thy mighty
grasp of me." The person who is looking within can never have assurance, because we are never good enough in this life. To
be human is to err. To be human is to sin. James 3:2 says, "in many things we all offend." There are no ideal husbands, wives
or ministers. There is no perfect job, no perfect school, no perfect church.

Since the Fall everything in this life is stamped with imperfection, and even when you and I are born again, we are part of this
creation that groans and travails together in pain. We only get the first fruits of the Spirit in this life. Perfection in an absolute
sense cannot be ours until glorification. Christ takes the guilt of sin the moment I'm converted. All my guilt is gone –
yesterday's, today's, and tomorrow's. But my sinful nature remains, though it does not reign.

While I look to Jesus, not one drop of the wrath of God will ever be upon me despite my failures, my lapses, my follies (and my
follies outnumber my sins). Despite that, the moment I believe, I am accepted, I am complete. I have a perfect righteousness.
Guilt is gone in a moment. But imparted righteousness is the work of a lifetime. It is never
complete for any of us.

Inherent righteousness is like inherent wisdom, it's never entire. "None of us knows much." All we know can go in the thimble
and the girl's finger as well. As wisdom is incomplete, knowledge is incomplete, righteousness is incomplete, and faith and
hope are incomplete. There is nothing complete within us in this life. That's why our hope, our faith, must always be in the
imputed righteousness of Christ, something outside of us that is perfect and complete, put to our account to cover the great
gap between what we are and what we should be.

Only at the coming of the Lord when he takes away not just sin's guilt (that went at conversion), not just sin's pervasive power,
(that is a lifetime task), but when he takes away sin's presence, when this sinful, corruptible nature is made like unto his
glorious nature, only then will things be all together right within. And so when Scripture says, "Lord, he whom thou lovest,
there's our rock, our anchor, and our assurance.

It is a terrible heresy to speak about perfection in this life. A person only has to look at his or her own prayers. If we loved our
neighbors as ourselves, we would pray for our neighbors' problems as much as for our own. None of us do. Examine your own
prayers. Oh yes, we throw in a little bit for grandma and grandpa, and dad and mom, and son and daughter, and the neighbor,
and the missionaries, but compare all that with our prayers for our own needs. Not many of us are kept awake by other
people's troubles. We have never loved our neighbor as ourself.

"Lord, he whom thou lovest." There's the Christian hope. God loves me just as I am despite what I am, despite what I've been,
despite the follies in which I'll be engaged tomorrow and the next day. God loves me. There is my hope and it's my only hope.

Does God Deceive Us?

"Lord, he whom thou lovest is sick." When Jesus heard it he said, "This sickness is not unto death." You know there are times
when God seems to be leading us astray. The sickness was unto death yet Jesus said, "It's not unto death." Why? Because
Jesus always looks at the ultimate. You and I are too much moved by the immediate, the present. It is hard for us to see the
ultimate and weigh things by the end.

If you were in a fight with Mohammed Ali, and you knew that you were going to win in the tenth round, you could put up with
being knocked down occasionally as long as it was going to come out all right in the end. The Christian has that hope. But we
are so deficient in faith, we so often look to ourselves, and circumstances that we don't get the comfort we should. Christ
always looked at the ultimate. "This sickness is not unto death." It was only going to be a sleep for Lazarus.
Please observe that Jesus was going to give them something better than they hoped for. If he had gone to Bethany, then he would have raised Lazarus from his bed. Instead, he went later and raised him from the grave. Which was greater? Which was most for the glory of God? Jesus had saved some people from the grave within a matter of hours of their death, like Jairus' daughter. On another occasion it was about a day after death when a young man was taken out of the widow of Nain's home. So Jesus could have done for Lazarus what he did for a few. But he didn't. He did something for Lazarus that was unique.

God wants to do something special for all of us. He wants to do something unique for and in and through every one of us. We are all different. As soon as we were born into this world, our work was born with us. God made us as we are by talent and gift. We have no more reason to be proud of our IQ our beauty, or our abilities, than the color of the hair we were born with. Whatever we are especially proud about, that thing is a "given." As soon as we were born God had something planned for us, something to do that we only can do as we grow. But we grow by pain, which comes most when the blessing of God seems delayed. Time has an irreplaceable part in our growth.

If there is a heavy weight on something resilient, as soon as the weight is removed, the thing that is resilient springs up as though the weight had not been there. If there is something filthy, you must soak it in the cleansing stream for a long time. God has to delay his answers to some of our prayers in order to give us the best answer.

To see the love of God in the delays of God is a mark of Christian maturity. I have often failed to see it. We human beings find the Christian walk like the ordinary walk, a continually interrupted falling and, therefore, the need of doing what Scripture tells us again and again – looking unto Jesus, the Author and Finisher of our faith. When we see what he is, we will interpret circumstances in the light of his heart instead of interpreting his heart in the light of circumstances.

**Following the Leading of God, We Are Perfectly Safe**

Reading further in this story of Lazarus in John, chapter eleven, our Lord says, "Let us go into Judea again." Notice he says, "Let us go." He does not say to the disciples, "You go." It was a dangerous place. They wanted tolynch him. But whenever we go into dangerous places, Jesus is with us. "The disciples said to him, 'Rabbi, the Jews were but now seeking to stone you, and are you going there again?' Jesus answered, 'Are there not twelve hours in the day? If anyone walks in the day, he does not stumble, because he sees the light of this world. But if anyone walks in the night, he stumbles, because the light is not in him.'"

What a tremendous statement! Christ is saying that if we walk in harmony with the will of God, nothing can touch us (in the sense of eternal damage). If anyone walks in the light, he does not stumble. It is when you and I walk in the darkness of self-will, sin, pride, arrogance, hate, lust, selfishness – these common problems of all of us – that we stumble. But if we walk in the light, we will not stumble. He is not saying that all will be without trial or trouble. He is not even saying we will not have hard rocks to clamber over. But he is saying to the disciples, you can't die one minute ahead of when God intends if you are walking within his will. While you are under the light of this world, (by which he means the will of God), you will walk securely.

In the eleventh verse he says to them, "Our friend Lazarus has fallen asleep." Notice that although Lazarus was dead, the relationship was not sundered. I never fully understood this till I lost a loved one. But by virtue of the Christian faith, if you lose a loved one who was a believer, the relationship is just as strong and real as before their death. They have only fallen into the hands of God. They sleep in Christ. They live in him. He will bring them forth on the morning of resurrection, and the broken family chain will be reunited. Christians never say goodbye to any of each other or Christ because of the love which is in Jesus Christ our Lord.

"Our friend Lazarus sleepeth. I go to awaken him out of sleep." Why does he speak of sleep? He speaks of sleep because of the harmless nature of sleep, because it is a precursor to rising and doing, because it brings rest. But chiefly it means this – because our Lord was to die on the cross in our place, the sting of death was to be plucked and made harmless. Death no longer can threaten the Christian. Oh yes, we fall asleep in what the world calls death, but that is all it is for us – a sleep. The Bible says, "He hath abolished death and brought life and immortality to light through the gospel" (2 Ti 1:10).

Most people never stop to think of death, or very rarely. Life is a frantic attempt to keep that thought out of the mind. But we are dying, and the person who does not have the Christian hope has every cause to be the most miserable. The person who has the Christian hope knows that Christ destroyed him that had the power of death and brought life and immortality to light, and that whatsoever believeth on the word of Christ, has everlasting life. He has it now! (see Jn 5:24). On the other hand, "he that believeth not ... the wrath of God abideth on him" (Jn 3:36).

The disciples say to Christ, "Lord, if he has fallen asleep, he will recover." Jesus had spoken of his death, but they thought that he meant taking rest in sleep. Then Jesus told them plainly, "Lazarus is dead; and for your sake I am glad that I was not there, so that you may believe." Observe that statement. "For your sake I am glad that I was not there ..." The delays of providence are the delays of love! Learn that, and you have learned to relax in the hard places. Learn that and you will be able to roll with the punches. Learn that and though you may be knocked down, you will never be knocked out.

**SUMMARY**

Life is full of suspense. Only by believing that God has a purpose of love in the present uncertainty can we rest.

Life is not a playground but a school.

A sinful world is characterized by imperfection in every person, place, and time. Don't expect otherwise.

Christian maturity is dependent on trusting God where we can't trace him.

There is perfect safety in doing the will of God, but nowhere else.
CHAPTER 52
The Delays of Love (Part Two)

The very problem in life that threatens continually to overwhelm us is often God's special gift to us for purposes of love.

* * * *

"Seeing is believing" is the worldling's motto. But for the Christian, believing is seeing. Notice how the whole of John's Gospel teaches this. "Jesus answered and said unto him, 'Because I said unto thee, I saw thee under the fig tree, believest thou? thou shalt see greater things than these.'" "Jesus saith unto him, 'Thomas, because thou hast seen me, thou hast believed: blessed are they that have not seen, and yet have believed.'"


* * * *

Delays Mean Benefit

Here is something that is very hard to believe, but it is true. There is no greater blessing than when there is some standing fact in our life which disturbs us, troubles us, makes a continual demand upon us, and which God does not hurry to remedy.

You and I, in our dealings with people, are far more concerned with making them comfortable than telling them the truth, but God is not like that. You and I are tempted to spoil our children, rather than give them discipline. But a child who is not occasionally frustrated is very likely to have a mental breakdown in adulthood. Unless a child learns to adjust to frustration by being told there are limits, he cannot stand the limits which the world enforces upon him when he leaves the cocoon of the family. The best way for a man to spoil his son is to give him everything he asks for. God doesn't make that mistake with us.

God sometimes throws us into the stream so we will learn to swim. The Scripture says he wants us to learn to run with the footman, so that one day we can contend with horses. If we cannot survive the days of peace, what will we do in the days of the swelling of Jordan?

"I'm glad for the delay," said Christ, "I'm glad for your sakes." I confess that I have not learned this lesson. I want to learn it, for it is true regardless of whether you and I have learned it. The delays of God in lifting our burdens, in solving our problems, in getting us what we long for, are the delays of love. Any cost is merited if it yields us a stronger faith in God and heavenly things, a stronger detachment from earthly things which moth and rust corrupt. While I can see my visible mountain of strength that stands firm, I don't feel my need of God. Security is mortal's greatest enemy. God uses the ax of sorrow to cut down many a material thing that impedes the way to the throne, and he will do it till you and I die or are translated.

Life's Tensions, Demanding the Response of Faith, Never Cease Here Below

There will never come a time when the flashing sword of the angel of Eden is not turning on all sides. I weary of it very often, but it is the way life is. We are God's children and he is not going to spoil us. He wants to give us something better than we ask for. The sisters of the sick Lazarus were saying implicitly, "Lord, come and take him off his bed." The Lord was going to give them something much better. Often I say, "Lord, I'll settle for something smaller, thank you, just take the pain away." But God loves us too much for that. Let us read on in this eleventh chapter of John.

Jesus came to Bethany and when Martha heard that Jesus was coming, we read that she went and met him while Mary sat in the house. And Martha said to Jesus, "Lord, if only you had been here, my brother would not have died." If only, if only! You know this is a phrase that is so common for all of us. If only. It's the heresy of the full cup. All of us feel things would have been so different if only. Things would never have become so bad if only.

The worst thing that can happen to you and me is to get all we want. I yearn for the chance to be spoiled but God is too wise to permit it. If only, we say. If only. Says Martha, "Lord, if only you had been here." See her diminished vision, her limited insight. And notice that all along the way the Lord does not speak so precisely that the element of tension is removed. He says in the beginning, "Look, this is not unto death, but God will be glorified thereby." That is pretty vague. And now he says to Martha, "Look, I am the resurrection and the life. He that believeth in me ..." But that is still vague. He is not saying, "Look Martha, relax, in a few hours you'll see him and embrace him." Why didn't he say that? God will never take out the tension from life. He wants us to learn to trust him where we cannot trace him. He wants us to interpret the circumstances of life by what we know of his heart and not to do the reverse. "Believeth thou? thou shalt see greater things than these." Don't expect God to reverse it and put you back into the kindergarten -- "Seest thou, you can now believe greater things." Believing is seeing for the Christian, never the reverse.

When our Lord came to the tomb of Lazarus he was deeply moved in spirit and troubled. In the 34th verse we read that he said, "Where have you laid him?" They said to him, "Lord, come and see." Then we have the shortest verse in the Bible. "Jesus wept." It shows that he was man. This Gospel pictures him as being thirsty, hungry, tired, and weeping. It is part of our common humanity to feel, to suffer, and to get tired. We are not gods. There is no sin in the fact that we are human. He wept as man, he wept as our substitute because he saw in this episode of death that which was going to bring him to the cross. He also was indignant with Satan and sin that had caused this death and all other deaths. Some versions say he was indignant.

He is thinking of the sin that has brought death and pain, and although he's going to bring deliverance, he weeps.

The Bible doesn't say you mustn't weep, it just says don't weep like those who have no hope. Jesus knew what he was going to do, but he still wept. He wanted us to know that he feels and he cares and that he shares. The One who hung on the cross has known our experiences. Born in poverty, despised and rejected of men, tempted and tried, forsaken of God, "Jesus wept."

Finally, he gives the command in verse 39. "Take away the stone." Immediately someone protests, "Lord, by this time there will be an odor, for he has been dead four days." There is always someone protesting when God is out to do a great work, but...
notice God doesn't do anything without us doing what we can. Without us he will not. That's just as true as "without him we cannot." Whatever you want, the knowledge of the Bible, the growth of a church, success in working for a loved one, without him we cannot, without us he will not. Divine blessing does not supersede human effort, and human effort without divine blessing is useless. So move the stone and when Lazarus comes forth, unbind him. Couldn't the same God who restored life have gotten rid of the wrappings?

**Our Part Is Small but Indispensable**

God never does for us miraculously anything we can do naturally. People who think they can be careless of their physical habits and then invoke a miracle of healing regularly and continually, have certainly misunderstood Scripture. God can and does work miraculously in healing, but it is not the case that you and I can flagrantly and repeatedly violate the laws of God in nature, the law of God that is written on every nerve, fiber, and cell of our being, and get away with it. Without us he will not, without him we cannot. It is my binding obligation to do all that I can in every area and then pray as though I had done nothing. Roll away the stone, that's for us! Roll away the stone of ignorance! Study the word. Roll away the stone of selfishness! Give to the work of God.

"Lazarus, come forth." If Christ hadn't said, "Lazarus, come forth" all the dead would have come forth. One day he will stand above the world and say, "Come forth," and all the saints will rise.

What was it that gave Christ the right to act in such a sovereign way, showing his power even in the realm of Hades? What gives Christ the right to act like that? Well, look at the next chapter briefly. Here is a picture of the resurrection life. "Six days before the Passover, Jesus came to Bethany, where Lazarus was, whom Jesus had raised from the dead. There they made him a supper. Martha served, and Lazarus was one of those at table with him." What a beautiful picture pointing to the fact that after the great resurrection we will all sit in heavenly places with our Lord around the great supper! But the point I want to stress is in the next verse. "Mary took a pound of costly ointment of pure nard and anointed the feet of Jesus and wiped his feet with her hair." Notice, she wiped his feet with her glory, for a women's hair is her glory. When we bring our glory to the feet of Christ, our talents, our wealth, our loves, our sympathy, our wisdom, our education, our abilities, wonderful things happen. She wiped his feet with her hair, and the house was filled with the fragrance of the ointment.

Why did Christ have the right to raise Lazarus? Because soon he, as the most precious thing in the universe, was to be broken meeting the demands of the broken law. Soon the fragrance of his death, the breaking of the flask of his precious body, would send the perfume of the atonement right through the universe. That precious alabaster box was a symbol of him. It was broken that the fragrance might fill the house, and so on Calvary our Lord was broken that the fragrance might fill the universe. It is because of that self-sacrificing love, because he paid the price of man's sin, because the penalty of the broken law was upon him, because he met the demands of justice and thereby freed us all, he had a right to raise Lazarus from the dead. What an encouragement for you and for me, because it won't be long until we will all be dining with Jesus. He has the right to bring us forth from the grave. It is sin that brings death, and our entrance into the grave is a token that we have sinned, but our Lord's victory over death as a result of his sinless life and atonement on the cross pledges that one day all who trust in him will have a right to come forth. He is faithful to not only forgive us our sins, but to resurrect us from the dead. It is part of justice, because sin's penalty has been met.

Perhaps the last thing we should note is this: as we see the love of God operating among the hard things of life, what an encouragement to trust and to persevere! Life is always going to be hard. If life for you is tremendously easy at the moment, let me tell you, it won't last. And let me tell you it's a good thing it won't last. I crave for the resting times to be longer, but that is just pure cowardice, because pain cannot last forever. This story tells us that even in our pain, God is there in sympathy and that he has a purpose in it. He has a purpose in the delays of his answers to our prayers. He has a purpose in everything he permits to happen. None of us stumble by chance if we're walking in the sunshine of his will.

**There Can Be No Dodging of Sacrifice**

What impact should these truths have upon us? In this story of the anointing there was one man who was so upset by the sacrifice of Mary that he cried out against her and said, "To what purpose is this waste?" and in a short time, as a suicide, he was swinging from a tree. The angels, who had come to the cross, as they beheld the suicide said, "To what purpose was this waste?" Here was one for whom Christ had died, who permitted selfishness to dominate his life, who never learned to give, who was always taking and receiving like the Dead Sea instead of giving like the living crystal sea of Galilee.

In your life and mine we are either like Christ or like Judas. All must sacrifice. There is no dodging that. Judas sacrificed eternal life. A life spent on self is sewage. Life must be broken that the fragrance will go forth. And the pains and troubles of life are God's ways of breaking the surrendered vessel that the fragrance of faith and hope and love might flow to his glory and our ultimate joy.

What a strange thing! Not one of us understands one ten millionth of the mysteries of creation, and yet we expect to understand all God's ways in providence or at least those that concern us directly. But we cannot. What a wonderful example we have in John, chapter 11, where we read in verse 6, "that when Jesus had heard that Lazarus was sick, he remained two days still in the same place where he was." And in verse 15, we have his words to his disciples, "I am glad for your sakes that I was not there."

What do the delays of God mean? Why doesn't God come immediately to our rescue if he loves us? Does he not know our pain? All of us have had experience of desires for the removal of bitterness, or sorrows, or desire for the fulfillment of expectations and wishes which we believe to be in accordance with the will of God. We have prayed in faith about such things and in submission, but there has been no answer. Jesus has delayed. Our hope seems to have died like Lazarus, but it is part of the method of providence that the lifting away of the burden and the coming of the desire should be a hope deferred. If God gave us immediately all we asked for, that's what we would always expect. We would cease to see the marvels of divine interposition and divine deliverance.
Faith Teaches Us How to Wait

Remember the story of Peter recorded in Acts, chapter 12? It had been determined by Herod, the tyrant, that he would bring forth Peter on a certain day and execute him as he executed James. But on the last night of the last week, the angel of the Lord invaded that prison and took Peter out. The record says that Peter was sleeping! I don't think I would have been sleeping if I knew my head would roll tomorrow. But Peter knew his Lord intimately and he rested in him. In the Old Testament there is a story of how the host of Sennacherib came up against Israel. They threatened the Jews, and Hezekiah went in before God and spread out an appeal. He showed the threatening letter and admitted that he had no might but that with God was all power. And we read in 2 Kings 19:35, "And it came to pass that night, that the angel of the Lord went out and smote in the camp of the Assyrians, an hundred fourscore and five thousand: and ... in the morning, behold, they were all dead." The deliverance was delayed but it came on time.

Sometime consider afresh the story of Jacob. He said, "I have waited for thy salvation, a Lord" (Gn 49:18). He had known what it was to wait seven years for his wife and then to get the wrong wife. And he waited another seven years for the wife of his heart. He had known what it was to lose his beloved son and to wait through the years for the explanation of the mystery of the missing Joseph. But there came the time when he was reunited with his beloved son. And he gathered all the sons about his dying bed, and as part of his last message to them he said, "I have waited for God's salvation."

Even on the cross Christ had to wait. We hear him cry, "My God, my God, why hast thou forsaken me?" He had been forsaken that you and I might never be forsaken. And yet it was not a real forsaking in one sense; because God was there, and on the third day Christ would be raised from the dead as the sign that the whole human race had been legally justified, that all sin had been rolled away, and that now whosoever will may come, and he that believeth, hath everlasting life. You and I long for easy things or easy ways, but strength and growth and knowledge never come easily. We must learn to endure. Seek not the crown before the cross. Remember we are to drink the cup as well as to eat the bread. There is tribulation as well as triumph. Christ tells us to bear the cross daily. Bear it looking unto Jesus and God will deliver. That cross will become to you as sails to a ship, wings to a bird.

SUMMARY

Life is essentially problematic. It is not easy for anybody.

Life is a school, its colors are black and blue and the school cry is "ouch!"

We should draw our comfort amidst life's trials from the fact that Jesus loves us, not that we love him. His love is permanent and unchanging, that's not true of ours.

It often seems to us that God is doing nothing about our troubles. This waiting time is also our growing time.

To see the love of God in the delays of God is the mark of Christian maturity.

There is no greater blessing than when there is some standing fact in our life which disturbs us, troubles us, makes a continual demand upon us, which God does not hurry to remedy.

In character building, time is an element that cannot be replaced by anything else.

Disappointment, frustration, and threatened heartbreak often destroy health, but faith can preserve it.

The only answer to these body-and-soul-destroying problems is faith in the goodness of God and trust in his overruling providence.
The story of the resurrection of Lazarus assures us that when God delays his answers to our prayers it is in order to give us something better.

God never takes the tension from life, for he wants us to interpret life's circumstances not by sight but by faith.

God never does for us miraculously anything we ourselves can do naturally. Christ's right to answer the prayers of the sisters, like his right to answer our prayers, is based on his death for our sins.
CHAPTER 53
The Best Medicine Is Love – The 1 Corinthians 13 Variety

Life need not be complicated. Living is only messy and intricate when we ignore Christ's way – the way of faith, hope, and love, and "the greatest of these is love."

He drew a circle that shut me out –
Heretic, rebel, a thing to flout.
But love and I had the wit to win:
We drew a circle that took him in.
– Edwin Markham

Above all these put on love, which binds everything together in perfect harmony.
Colossians 3:14

Now abides faith, hope, love, these three; but the greatest of these is love.
1 Corinthians 13:13

The fruit of the Spirit is love...
Galatians 5:22

Beloved, let us love one another; for love is of God, and he who loves is born of God and knows God. He who does not love does not know God; for God is love.
1 John 4:7, 8

Oh brother man! fold to thy heart thy brother.
John Greenleaf Whittier.

It's the Greatest!
Well begun is half-done. We know this to be true in many practical areas of life. When traveling, and we have a specific destination in mind, half the battle is getting the directions straight, particularly the matter of a starting place. We must never confuse activity with achievement. The further we go in the wrong direction, the further we will have to travel back when we discover our mistake.

What then is the way we shall go? How should we live? The New Testament answers, "I will show you a more excellent way" (1 Cor 12:31). The truth of all things revolves around the central truth of the nature of God, and Scripture declares to us that "God is love." If those three words were believed, the world would become a paradise. War and crime would be no more, depression in the workplace and antagonisms in the home would cease.

Consider the richness of the promise in 2 Timothy 1:7, "God hath not given us the spirit of fear; but of power, and of love, and of a sound mind." Look at the gifts of God – power, love, and a sound mind. Observe the central one is love. Colossians, chapter 3, calls it "The bond of perfectness." Dante said it is love that spins the universe. Certain it is that Scripture teaches that only love can spin each human life aright. There's no power, and no sound mind without love. It is impossible to be completely healthy without love, for health takes in the whole of man – body, mind, and soul.

And now we return to the more excellent way promised by Paul. First Corinthians 13 sets forth that way. Notice its description of love:

Love is patient, love is kind, and is not jealous; love does not brag and is not arrogant, does not act unbecomingly; it does not seek its own, is not provoked, does not take into account a wrong suffered, does not rejoice in unrighteousness, but rejoices with the truth; bears all things, believes all things, endures all things.

Love never fails... (1 Cor 13:4-8)

You will recognize that this is not only the description of a virtue, but of a person. The apostle had Jesus before his mind's eye as he wrote about love. Wherever you see the word "love" put "Jesus" there. Jesus suffered long and was kind. Jesus envied not, vaunted not himself, was not puffed up. He did not behave himself unseemly, and sought not his own. Anything that is selfish is not love, and ultimately brings only pain and loss, but Jesus by his selfless love brought us life everlasting.

God, in the manner of our arrival on this planet, was teaching us about the more excellent way—the only way that really works. When a human being is born, it is the most helpless of all animals. Usually there are two mature beings who love us, who care
for us, whose main task is to teach us to love. Mother love best represents the love of God for it is unconditional love. She loves the child no matter what he or she does and will continue so to love even if he or she goes to the electric chair. Father love is disciplined love. He represents the reality outside the home where conflict and pain, sweat and tears are inevitable. Father love teaches that unless our love is disciplined and all our life by that love, we will never be able to rightly interact with the outside world. So father and mother love combined teach us the realitites of law and grace, of trust and obedience. The person who learns these lessons is equipped for life.

A child brought up in a Christian home and nourished on the Scriptures and taken to a church where faith, hope, and love are paramount, has everything going for him for mental and spiritual health. Because he knows he is loved, he will value his body too much to abuse it. He will be disciplined for the Savior's sake. Because he knows all others are loved and are the purchase of the blood of Christ, he will love too much to hurt others.

All the fruits of the spiritual life proceed from love. Love begets them. We are all familiar with the list given by Paul in Galatians, chapter 5. Here we read: "the fruit of the spirit is love, joy, peace, long-suffering, gentleness, goodness, faith, meekness, temperance..." (Gal 5:22, 23). Observe that all of these virtues are actually love in one form or another. Joy is love exulting, peace is love repose, long-suffering is love enduring, gentleness is love refined, meekness is love with bowed head, goodness is love in action, temperance is true self-love, and faith is love confiding, so that the whole of Christian living is just loving.

One Drop of Love – Better Than a Sea of Knowledge

When we come to understand this, we will see also that one drop of love is worth more than a sea of knowledge. The person who learns to live unselfishly knows more about health than he who has done a whole course of medical training. The law of the universe is giving. The sky has dropped down the rain, and the sun its beams of light. The trees yield fruit, purify the air and add the oxygen so necessary for life. The animals give us joy, food, and companionship. Even the birds give us songs. Nothing except the selfish heart of man lives to itself. For the person who lives to himself is preparing himself for disease. Look at the cross of Christ. His heart is there at the center, but his arms are stretched outward. The cross radiates outwards. It is the opposite of a circle that confines all things within. The cross represents the outflowing life, the unselfish life, the giving life, the loving life. It is really the only life worth living. It is the only truly healthy life.

So many human maladies are the result of not having learned to love. A greedy, ambitious, grasping man is under the delusion that if he accumulates a lot of things and a lot of wealth he will become the object of love. He thinks that if he climbs the ladder of success, he will be admired and loved. Of course he is wrong on both counts. But to be a sinner is to be a fool, and we are all fools.

A kleptomaniac cannot help but take things. He is so hungry for love he thinks this is how his need will be met. Here is a child who at a very young age is caught stealing. Why so? He has just lost his mother. His heart has been torn, for the love of his life is gone. He is trying to fill the vacuum. That's why he steals. Here are angry, violent people wreaking their hatred on all in their path. Why are they like that? They are frustrated people because they were not loved as children. Only those who have been loved can love. The only hope for a man or a woman who has not known the unselfish love of parents is to discover the love that surpasses – the love of God. "When my father and my mother forsake me, then the Lord will take me up" (Ps 27:10). The people who know that they are loved no longer have to prove anything. They have arrived. They have satisfaction. They are of value to themselves, because they are of value to God. We see an image of this wonder in what happens to young people when they fall in love. When one young person finds another who accepts him or her despite his or her faults, then life becomes transfigured and radiant. That is just a pointer to the greater experience of falling in love with God. But no one loves God until he discovers that God loves him. This is the meaning of the cross. "While we were yet sinners Christ died for us" (Rom 5:8). God's unconditional love accepts us just as we are. We don't try to make ourselves better before we come. God will care for that after we have come. We don't try to win his peace with God. We can't do it, we never could do it. Christ has already done it. Christ is our peace. We don't try with Christ is God and peace. "For he is our peace" (Eph 2:14).

Only Love Brings Perfect Rest

There can be no health except when the mind is at rest. The mind can only be fully at rest when it rests in the love of God. Others may seem to have physical well being for a season, but as the storms and tempests of life blow upon them, that health will keep waning unless they are sustained by the knowledge of the love of God. Seventy to ninety percent of our diseases arise from the faulty use of our imagination and our emotions according to most students of psychosomatic medicine. Most of the people who come to doctors' offices day after day do not have organic disease. They have functional disease which is quite different.

Functional disease is usually the result of emotional disturbance, of fear, anxiety, worry, and the emotional Farrago that accompanies these. The troubled mind casts a shadow over all the physiological functions of the body. Digestion becomes imperfected, and the heart rate also. Intestinal and bladder function are disturbed. There's not one cell of the body that is not marked by the influence of mind. Many are the daily experiences that prove this to be the case. A person receives a fright and turns white. A man or a woman is about to speak in public, and they feel a sudden urge to visit a rest room. Passion causes the heart to beat. Fear can make the hands clammy. Breathing is disturbed by our emotions. It's dangerous to eat when sad or mad or bad, because the digestion is disturbed by the ill-functioning mind. A child sucking mother's milk can be poisoned if the mother is emotionally disturbed at the time. Much colic has its origin here. The inability to sleep is frequently the result of either a troubled mind or an overworked one. Many skin diseases spring from a disturbed mental equilibrium.

Those who take Scripture as their guide will have a different approach to preventive medicine than those who do not acknowledge the Word of God. Yet it must be confessed that in recent years many students of the human psyche have come to acknowledge the predominance of the human spirit in matters of health. Carl Jung, for example, has confessed that for over thirty years the thousands he has counseled had only one major need – that of religious faith. He declared their mental and physical ills could be healed only in that way.
You are always dragging me down," said I to my Body. "Dragging you down!" replied my Body. "Well I like that! Who taught me to like tobacco and alcohol? You, of course, with your idiotic adolescent idea of being "grown-up." My palate loathed both at first: but you would have your way. Who put an end to all those angry and revengeful thoughts last night? Me, of course, by insisting on going to sleep. Who does his best to keep you from talking too much and eating too much by giving you dry throats and headaches and indigestion? Eh?" "And what about sex?" said I. "Yes, what about it?" retorted the Body. "If you and your wretched imagination would leave me alone I'd give you no trouble. That's Soul all over; you give me orders and then blame me for carrying them out."¹

Dr. Smiley Blanton has an excellent book entitled *Love or Perish*. Just prior to his introduction he has a little note that says:

To say that one will perish without love does not mean that everyone without adequate love dies. Many do, for without love the will to live is often impaired to such an extent that a person's resistance is critically lowered and death follows. But most of the time, lack of love makes people depressed, anxious and without zest for life. They remain lonely and unhappy, without friends or work they care for, their life a barren treadmill, stripped of all creative action and joy.²

**Lovelessness Brings Intolerable Stress**

There is a striking illustration given by Dr. Blanton, drawn from a documentary film of an American foundling home. The film tells the story of ninety-seven babies, ranging from three months to three years of age who "sickened and died for lack of love." These children were neither neglected nor abused in the ordinary sense of those terms. They received normal routine care, being adequately fed and clothed and given medical attention. There were competent nurses at the institution. What then was the problem? The foundling home was understaffed and each nurse had to care for at least ten of the orphaned children. This being the case, nurses could do little more than feed and clothe and bathe their charges. They had no time to play with them, to love them. The first symptoms in the children deprived of love were demanding attitudes and the increased tendency to cry. But after three months the symptoms were more grave. The infants lost appetite, were unable to sleep, and there was a mournful vacancy of expression. After five months, "deterioration had set in with accelerated swiftness. Most of the babies became shrunk beyond recognition. They lay whimpering and trembling, their faces twisted into grotesque expressions. The film has one harrowing sequence in which the doctor tries to comfort a fifteen-month-old girl. He picks her up gently and smiles. But the child screams in panic. One hand clutches the doctor for protection. The other beats wildly at him in terror. In the child's agonized countenance one recognizes the horrifying features of a person driven insane by loneliness and fear."³

Many are the researchers that tell the same story. The books of Dr. Hans Selye have demon stated the influence of stress on the body's hormonal output. When the hypothalamus is disturbed by emotion, the pituitary is immediately influenced and in turn influences the adrenal and other glands. If the alarm reaction becomes chronic, the glands are ultimately exhausted. At that point resistance to diseases is lowered and almost anything can begin to happen within the physical organism. According to Dr. Selye, illnesses developing from emotional stress cover the gamut from hypertension and arthritis to rheumatic fever and heart disease.

Where shall we start in our search for health? Remember how the Bible starts — "In the beginning God," That God who is our maker and preserver is love. His love is just as infinite as his wisdom and his power. It is a love that forbears and forgives. He invites the worst as well as the so-called best, saying, "Come to Me all who are weary and heavy-laden, and I will give you rest." "All that the Father gives Me shall come to Me; and the one who comes to Me I will certainly not cast out." "All sin and blasphemy shall be forgiven men." "And it shall be, that everyone who calls on the name of the Lord shall be saved." "For God so loved the world, that He gave His only begotten Son, that whoever believes in Him should not perish, but have eternal life."⁴

Whoever believes these promises and takes hold of Christ thereby receives love. The love of God is poured into our hearts by the Holy Spirit who was given unto us (see Rom 5:5). Now the sky above is a richer blue, and the grass around a deeper green. Now we see in all those around us the purchase of the blood of Christ. Now we know that despite our imperfections we are loved and accepted. "Ye are complete in him" and "accepted in the beloved" and "without condemnation" (Col 2:10; Eph 1:6; Rom 8:1). "If we walk in the light, as he is in the light, we have fellowship one with another, and the blood of Jesus Christ his Son cleanseth us from all sin" (1 Jn 1:7).

Those who learn to live, not according to outward circumstances or inward feelings, but according to the facts set forth in the Word of God will find their whole lives transformed. Their mind and spirit will be so energized that the life-giving influences of the hormones will foster well-being throughout the whole system. Blood circulation will be better, digestion improved, and a host of pressures removed from the physical organism itself. No wonder in his third epistle John can say, "Beloved, I pray that in all respects you may prosper and be in good health, just as your soul prosper." We are on the way to that prosperity of health when we make God first and last and best in our lives and believe that he is love, and that therefore all things work together for good to them who love him and their fellowmen.

**SUMMARY**

Not only does love make the world go around, but it's the only motivation that can spin each individual human life aright.

It is impossible to be completely healthy without the habitual exercise of unselfish love.

Mother love best represents God's unconditional love.

The father's stern love rightly represents the discipline of the world outside the home.

Father and mother love combined teach us the realities of law and grace, of trust and obedience.

All the fruit of the spiritual life proceeds from love.


² Partially quoted from ibid., 6.

³ Partially quoted from ibid., 55.

⁴ Partially quoted from ibid., 20.
It is a mistake to seek to possess love. We should seek for Christ, and with him comes love and all the other virtues.

The chief characteristics of love are giving and forgiving.

When we accept the love of God, we can accept ourselves and others as well.

No one loves God until they discover that God loves them.

There can be no health except when the mind is at rest, and the mind can only be fully at rest when it rests in the love of God.

A troubled mind casts a shadow over all the physiological functions of the body, but a happy mind contributes to the best of health.

The one option for all of us is to love or perish.

**REFERENCE**

SECTION V
QUESTIONS AND ANSWERS

"Leave behind your foolishness and begin to live; learn how to be wise"
(Proverbs 9:6)

CHAPTER 54
Questions and Answers on Nutrition

You should know that the way you eat and the way you exercise today may strongly affect how pleasant or unpleasant your life will be in the years from about 50 onward. By not thinking about your future now you may do a great deal more to yourself than merely shorten your life span by 20 years or so. You may be condemning yourself to a painful and extended period of decrepitude and illness, beginning somewhere in your fifties and growing in severity until your death. You cannot start too young to prevent this situation: the younger the better.


* * * *

Dr. Joyce Brothers once wrote: "We Americans have been called the most overfed, underexercised people in the world. This really is just a polite way of saying we are a bunch of fat slobs."


* * * *

The over-riding reason why the free market cannot operate with food is, as has already been stated in this book, that there is, and always will be, a clash between health and wealth, as far as food is concerned. A good food is a bad commodity. Good food goes bad, because it supports life. There is, purely for economic reasons, a constant pressure to drive down the quality of food. To some extent this pressure can be resisted, in a democracy, by consumers insisting on good food and refusing to buy bad food.

Carolyn Walker & Geoffrey Cannon, The Food Scandal, p. 305.

* * * *

QUESTION:
Is it now quite beyond dispute that excess cholesterol in the diet is a chief factor in coronary heart disease and that the reduction of dietary cholesterol is a wise preventive measure for those whose cholesterol is over 180 MG/dL?

ANSWER:
In the minds of most researchers, the answer is a definite yes. To quote one of them: "The cholesterol issue is dead." He meant the issue was solved. See the classic studies by Levy in JAMA, 1984; 251:351-374. See also the recent pamphlet "The Clinical Significance of Hyperlipidemia" which summarizes the proceedings of an international symposium held in conjunction with the eighth Asian Pacific Congress of Cardiology. The study by Conrad P. Blum, M.D., and Robert L. Levy, M.D., entitled “Lipids and Lipo Proteins in Atherogenesis,” is an up-to-date summary. Even before the close of the most expensive medical experiment in history (costing over $150 million), The New England Journal of Medicine, of June 29, 1.978, went on record as saying:

... dietary cholesterol intake from 0 to 600 mg. per day is closely correlated with plasma cholesterol levels. Dietary saturated fatty acids elevate plasma cholesterol levels ... Animal studies, particularly in subhuman primates, reveal an unequivocal causal relation between dietary cholesterol or saturated fat, plasma cholesterol levels and development or regression of atherosclerosis.

Marked alterations in dietary practices, as exemplified by vegetarians, result in lower plasma cholesterol and reduced CHD. Primitive populations often have sharply lower dietary cholesterol, and saturated fat intake, with accompanying low plasma cholesterol and reduced CHD. Emigrants from populations having low plasma cholesterol to ones in which it is high subsequently acquire elevated cholesterol levels comparable to their host population within a few years of their emigration.

A report in JAMA, April 12, 1985, from a consensus conference, stressed the urgency of lowering blood cholesterol levels in order to prevent heart disease. On page 2080 we read:

A large body of evidence of many kinds links elevated blood cholesterol levels to coronary heart disease.

It has been established beyond a reasonable doubt that lowering definitely elevated blood cholesterol levels (specifically, blood levels of low-density lipoprotein [LDL] cholesterol) will reduce the risk of heart attacks caused by coronary heart disease.

On the following page the same article affirms that while "... it is equally clear that an elevated blood cholesterol level is not the only cause of coronary heart disease" "severe coronary heart disease can result from high blood cholesterol levels in the absence of any other contributing risk factors."
The same article points out clearly that no population has ever been reported to have a high rate of coronary heart disease that has low blood cholesterol levels. Furthermore, reports the Journal, "Prospective studies such as the Framingham Study, show that elevated blood cholesterol levels in healthy people predict the future occurrence of coronary heart disease." Then we have the conclusion: "... The evidence obtained from genetic, experimental, epidemiologic, and clinical intervention investigations overwhelmingly supports a causal relationship between blood cholesterol levels and coronary heart disease."

On the same page 2082 we also read: 

"... reduction of blood cholesterol levels in people with relatively high initial levels will reduce the rate of coronary heart disease." Q.E.D.

The diet should not include more than 30 percent of the caloric intake from fats and no more than 250-300 mg. of cholesterol each day. More thoroughgoing exponents of a low cholesterol diet, such as Pritikin and McDougall, would cut that 30 percent to 10 percent or even less, and 300 mg. to 100 or less.

Lastly, the JAMA articles stress that "Drug therapy should be used only after a careful trial of diet modification using the most rigorous diet appropriate for the particular individual" p. 2084.

The consensus conference reported by JAMA was not reluctant to urge a shift from the current typical American diet. It recommended that Americans should come closer to the usual diets used in such countries as Japan and Greece where there is less intake of total fat, saturated fat, and cholesterol.

This is a summary of the most important findings in recent times regarding diet, with the only equivalent discovery being that of Denis Burkitt, with his stress on the use of unrefined foods. Dr. Linus Pauling no doubt would feel that we should include his studies on Vitamin C, but it may be sufficient to say that any diet consisting largely of unrefined food products usually contains a high amount of this necessary nutritional factor.

QUESTION:

Is the matter of the harmfulness of coffee a closed question or is it still being debated?

ANSWER:

It is still being debated, but nonetheless there are none who come up with a series of benefits supposedly derived from the use of caffeine. As The New England Journal of Medicine, of April 9, 1987 declares, on page 945, "Conflicting data exist on coffee drinking and coronary heart disease." It should be remembered that this was originally said when tobacco was indicted.

The same was once true in the cholesterol controversy. Those who wait for absolute demonstration may wait too long.

QUESTION:

I hear and read about salmonella from time to time. It seems to me the warnings are becoming more frequent. Is this so?

ANSWER:

This is so. A recent article in The New England Journal of Medicine, of March 5, 1987, spoke about salmonella newport being traced through hamburger to dairy farms, and spoke of this as a major persisting source of human salmonellosis in California.

The article declares:

We conclude that food animals are a major source of antimicrobial-resistant salmonella infections in humans, and that these infections are associated with antimicrobial use on farms.

This article also points out that the majority of salmonella cases are caused by eating hamburger that has been only partially cooked. The authors declare that raw beef is not expected to be free of salmonella, and that hamburger is a well-recognized source of human salmonellosis. There are similar concerns about shellfish.

QUESTION:

Do I really have to eat a lot of fish in order to get omega-3 fatty acids, or must I swallow a lot of concentrated fish-oil capsules?

ANSWER:

It is true that marine omega-3 fatty acids lowers plasma lipid levels and reduces platelet aggregation, but consuming a great deal of fish oils is not necessarily a beneficial procedure. There is cholesterol in fish oils, and it has been calculated that Eskimos consume about 245 mg. per 100 kcal daily.

Some researchers believe that commercially available fish-oil capsules have the potential health hazard of an excess consumption of vitamin A. Others have shown that nonfish sources of omega-3 fatty acids include walnut oil and walnuts, wheat-germ oil, rapeseed oil, soybean lecithin, soybeans and tofu, common beans, butternuts, seaweed, and purslane. One doctor writing to The New England Journal of Medicine commented that "Fish oil is a whale of a story that not surprisingly gets bigger with every telling." Dr. Michael A. Weiner, writing for the Journal of March 5, 1987, warned that the benefits Eskimos may derive from their marine-based diet cannot be guaranteed to those who use commercially prepared fish-oil capsules.

Incidentally, it should be mentioned that while Eskimos have a low rate of heart disease, they do have one of the highest rates of osteoporosis in the world. It must be concluded that the use of fish-oil capsules is still very much a debatable matter, and cautious people will avoid climbing on every recent nutritional bandwagon.

QUESTION:

Is it true that sulfites are used in preserving dried fruit?

ANSWER:

Sulfite preservatives are used for light-colored fruits such as apples, peaches, pears, apricots, and golden raisins. Approximately a million Americans, primarily asthmatics, are in danger from these preservatives. Sometimes sulfites can even have a fatal reaction for such people.
QUESTION:
Is it so that after the forties one's nutritional needs are much smaller, and it is necessary to reduce fruits and vegetables and whole grain foods because of difficulty of digestion and simultaneously take vitamin and mineral supplements?

ANSWER:
No, this is not true. Beginning with one's twenties caloric requirements diminish at approximately 2 percent per decade. Older people very much need fruits, vegetables, and whole grains, though there may be a minority that has difficulty in the digestion of some of these. As we have said elsewhere, vitamin and mineral supplements may play a useful part for expectant mothers and for people who are ill or have special needs. But for most of us a varied diet of fresh and unrefined foods is sufficient.

QUESTION:
I hear that vegetable oils are good to counter heart disease. Is this so?

ANSWER:
This is still being debated. And one should keep in mind that refined vegetable oils may ultimately be seen as just as harmful or more so than other refined foods. Nature never makes a pure oil, it always comes to us in food in an emulsified form, and this is the way it should preferably be used. It is better to eat olives than to consume large amounts of olive oil. It is better to have sunflower seeds than to have a lot of sunflower oil. Soybeans are to be preferred to soybean oil. The use of vegetable oils seems to decrease the amount of cholesterol in the blood but not in the tissues of the body. Many link excessive amounts of vegetable oil with the formation of cancerous tumors.

QUESTION:
Are some vitamins dangerous in excess?

ANSWER:
Two of the fat-soluble vitamins (A and D) if taken in excess can produce disease. Usually overdoses of the water-soluble vitamins (the B vitamins, C, pantothenic acid, folic acid) are considered to be harmless. This, however, is not fully the case. For example, overdoses of pyridoxine or vitamin B6 can be very dangerous, indeed, producing strong, neurological symptoms. Nerve fibers in the extremities degenerate, and those nerves that carry sensory messages are particularly affected. Even after the excess vitamin intake is stopped, it may take several months for the nerves to fully recover. Some researchers also believe that vitamin C in mega doses may have bad effects for certain people. That debate is not yet concluded.

QUESTION:
Is it true that most antacids contain an excessive amount of sodium?

ANSWER:
Yes. When we remember that the average adult consumes 8 to 10 lbs. of salt per year, we should be very wary of the use of popular antacids.

QUESTION:
Can you recommend any good cookbooks which are based on proper dietetic principles?

ANSWER:
The publishers of this volume have a small book entitled The Inside Story which sets out the principles of nutrition in an easy-to-read fashion and also has hundreds of recipes. For a larger, more comprehensive work, there is probably none better than Jane Brody’s Good Food Book. More thoroughgoing still are the books of Dr. John A. McDougall’s wife, Mary – The McDougall Health-Supporting Cookbook, Vols. 1 & 2.

QUESTION:
How safe are liquid protein diets?

ANSWER:
Not safe at all. Scores of deaths have been recorded as a result of this wrong approach to weight reduction.

QUESTION:
Is it possible that the same wrong habit, such as dietary imprudence, could be responsible for different fatal diseases in different people?

ANSWER:
Certainly. In the article, “Cholesterol, Cancer, and Public Health Policy,” of the American Journal of Medicine, September 1983, the authors say, "Limitation of dietary fat and cholesterol intake is a prudent public health measure for the prevention of both coronary heart disease and cancer." It is our western way of eating that is responsible for most of our western diseases. Which disease overtakes us first is determined in part by a variety of factors, including the nature of the host, that is, the individual person. Genetic factors also play their part, as well as environmental pressures.

QUESTION:
To what degree can dietary changes reduce total serum cholesterol levels?

ANSWER:
QUESTION:
Can you give us the essence of what modern scientific researchers are saying about diet?

ANSWER:
That's a simple matter. Eat mainly fresh, whole foods, chiefly of vegetable origin. That is a sentence that's worth much, much more than a million dollars if you apply it. It is the distilled wisdom of modern nutrition, and agreement upon it has been reached by about forty international research committees over the last decade or so. It stresses that the food should be mainly "fresh" because only fresh food has adequate amounts of vitamin C which is needed every day. Water-soluble vitamins cannot be stored and, therefore, the diet must provide them regularly. The recipe calls for "whole" food, because only whole food has the proper proportions of fiber and the proper proportions between minerals, vitamins, etc. Adequate fiber is a protection against some of the most insidious of our enemies – atherosclerosis, diverticular diseases, and cancer of the large intestine. The consumption of fiber promotes regularity, softer stools, and prevents constipation. It also increases the excretion of fat, sterols, and bile acids. Keep in mind that at least 50 percent of all deaths past the age of forty-five can be directly attributed to atherosclerosis. The excess cholesterol largely responsible for this can be excreted safely if the diet contains a large amount of fiber. But a refined-food diet invites the formation of plaque and cardiovascular diseases which can end life prematurely by decades.

It cannot be said too often that heart disease is relatively rare among people who consume a vegetarian diet, either in western countries or in those countries where meat is scarce. It should also be remembered that we are not thinking about fiber problems. Diverticulitis, for example, results in major surgery for well over half a million Americans each year. Remember also that about six times that number are treated at home and don't undergo surgery. The type of surgery involved often includes a temporary colostomy. This particular disease is increasing in incidence at a rate estimated at 16 percent. The people with diverticular disease are likely to have appendicitis, hemorrhoids and varicose veins, as well as polyps of the bowel. There is frequently a hereditary role which may in some cases have the casting vote, but the importance of fiber is undeniable. The rural African does not have diverticular disease, but his relative in the city does have it with about the same frequency as western man. This has been documented by such writers as Painter, Kim, Kyle, and others.

The male in this country is six times more likely to develop intestinal cancer than his counterpart in lesser developed societies, and surgery for the disease is indeed drastic and usually results in a permanent colostomy. About five to ten patients survive surgery each year for every death.

When our earlier sentence summary on nutrition included the words "chiefly of vegetable origin," it was referring to the need of avoiding excessive cholesterol and saturated fats. This is not suggesting a total prohibition of animal products. No one dare say that all people should avoid meat, etc. But we do know that the less animal products the better for the vast majority of people. That is certain and beyond dispute.

While we would warn against the error of demanding that all be vegetarians, even lacto-ovo-vegetarians, the facts about a diet with excessive animal products must never be glossed over. The typical western household uses about ten pounds of meat every week – that's about the size of a human baby. Never before in history have human bodies on a large scale had to exist on such a diet. And furthermore, the type and quality of meat in our day is very different to that which was eaten during the preceding century. Modern farmers for years have been using literally thousands of drugs and feed supplements – and these have never been approved for use, and some of them have actually been proven to be cancer-causing.

In recent years, a number of researchers have linked a great rise in diabetes to diets high in fat. Children now are six times more likely to develop diabetes than their parents were. In some western countries, diabetes-related complications are the third largest cause of death. Back in 1960 the School of Public Health at the University of Minnesota started a massive study which lasted for 21 years and involved about 26,000 adult Americans. They were well known for their low meat consumption. The findings show that people on meat-free diets had a substantially reduced risk (over 40 percent) of developing diabetes, compared with more typical populations. Heavy users of meat are about four times as likely to develop diabetes as those that don't use it at all.

Consider also that heavy meat-eating is linked with hypertension. And keep in mind that one-third of all deaths that occur in people under sixty-five years can be attributed to hypertensive causes. As a matter of fact, the most important numbers associated with you are not those measurements around waist or chest, or even your age, but rather the numbers reflecting your systolic and diastolic blood pressures. About 70 million people in America have statistics in these areas which indicate the likelihood of a shortened life span. It has been frequently said that in cases of essential hypertension (the most frequent variety) the cause is unknown. But there is a fair amount of agreement today that the causes include a high-salt diet, smoking, sedentary life-style, and certain drugs widely used. Research indicates that among meat eaters there is a steady rise in blood pressure in advancing years, but this is not the case for vegetarians.

Of great significance is the following summary statement from The Lancet, of April 2, 1981:

With a concomitant reduction in fruit and vegetable consumption and the eating of more processed food, potassium intake has fallen from an estimated 100-250 MMOL/day to 30-80 MMOL/day. Animal and epidemiological studies suggested this very high dietary sodium and low potassium intake might have an important role in determining blood pressure levels within a community. High blood pressure is an important predisposing factor to the development of strokes, heart attacks, and renal failure, and is probably the most preventable cause of death in the west.

Recommendations in the USA, Belgium, and recently in the UK, that the whole population should reduce sodium and increase potassium intake are therefore based not on direct evidence but on animal and epidemiological evidence. We may have to face the unpalatable fact that public health decisions often have to be taken without direct evidence,
however, some comfort may be gained from the fact that the decision about many previous public health measures, for example, vaccination for Smallpox and provision of clean water and drainage at the time of the cholera and typhoid epidemics in Europe in the nineteenth century, have been taken under similar circumstances. Indeed some of these changes were posed by the medical hierarchy at the time and evidence that they were beneficial came retrospectively. Careful observation of communities in which intake of either or both sodium and potassium has been altered may provide the evidence...

In the west potassium intake varies more widely than sodium intake. Vegetarians have a higher potassium intake, may have a lower blood pressure, and might be expected to have a longer life expectancy than non-vegetarians. In many western communities, eating more potassium would only restore potassium intake to that eaten elsewhere...

Only 5-10 percent of sodium consumed in the western diet occurs naturally in the food (mainly in meat). The rest is either added to food as salt at the table and in cooking (20-40 percent) or is added to processed foods (30-70 percent)...

As well as adding sodium to the food, food processing removes potassium...

Changing the fat intake, switching to a vegetarian diet, and taking a higher-fiber diet have also been claimed to lower blood pressure independently of their effect on sodium or potassium intake. Coffee causes an acute rise in blood pressure and withdrawal from alcohol can cause pronounced rises in blood pressure. (The Lancet, April 2, 1983, pp. 750-752)

QUESTION:
What biblical evidence can you muster along these lines?

ANSWER:
The paradigm set forth in Genesis, chapters 1, 3, and 9, the statements in Leviticus, such as 3:17, God's original provision by the manna for his wilderness people, along with some hints that might be gleaned from Daniel 1, 10, and the story of John the Baptist, certainly places a premium on the type of dietary indicated by our summary sentence earlier – eat mainly of fresh whole food, chiefly of vegetable origin. Again we wish to emphasize that it cannot be proved from Scripture that it is wrong to eat meat. Scripture sets forth animal products as a beneficent provision for needy multitudes in a variety of conditions.

Individuals must reason from cause to effect, as well as from the truths derived from medical science and Scripture, and then make the decision that they believe will redound most to their own good health and the glory of God. It is certainly possible to quibble over several of the Scriptures that I have cited. For example, it is quite clear in Daniel's case that while at times he refrained from animal products, there were other times when such products were part of his normal menu. Whether the locusts consumed by John the Baptist were animal or vegetable is still debated. My own opinion is that the locusts referred to were very likely the locust beans. But this may not be capable of demonstration, and we are left to conclude with certainty only the fact that John the Baptist lived very abstemiously. But there can be no effective argumentation against the New Testament passages such as 1 Corinthians 10:31; 6:19-20; 9:24-27; Romans 6:6, 13; 12:1.

Our Lord Jesus Christ was no physical weakling. Any man who could stand up to the treatment he received in the last 24 hours of his life and still be found thinking clearly at the close of it all was a man of tremendous physical and vital reserves. In John 4 we see him walking about 20 miles in a single morning. His program as set forth on certain other days was one that would have overwhelmed almost all of us, beginning as it did long before dawn and embracing uninterrupted toil among multitudes hour after hour until the dark. To make the example of Christ a law for us, individually, upon obedience to which our salvation depended, would be to fall again into the trap of legalism. But there can be no reluctance to enshrine him as the model of the soul and to strive continually to reflect his ways as well as his character wherever appropriate for the twentieth-century scene.

One last note. The great adversary ever tries to camouflage the blessings of God and make them look like heavy burdens and cruel crosses. The truth, of course, is that our loving heavenly Father only asks of us that which is for our own benefit. He forbids nothing but that which would hinder our joy in this life and that of the life to come. The path of nature and revelation is wide enough for all who wish to please their Savior.

QUESTION:
Are you suggesting that the new approach to nutrition among modern researchers calls for continual pill-popping of vitamin and mineral tablets, etc.?

ANSWER:
Vitamin and mineral tablets have their place. But when we consider that the animals most physiologically like man, maintain perfectly good health without them, it becomes apparent that pill-popping is not the way to health. Expectant mothers, the aged and the infirm, and some suffering from peculiar dietary deficiencies benefit from added vitamins and minerals, but they are not necessary for most of us if we eat wisely.

QUESTION:
Does the taking of calcium tablets help people with osteoporosis?

ANSWER:
Probably not. An article in The New England Journal of Medicine, of January 22, 1987, is entitled "Does Calcium Supplementation Prevent Post Menopausal Bone Loss?", a double-blind, controlled study." – The conclusion is as follows:
Our preliminary data suggest that calcium supplementation in the dosage we used is not as effective as estrogen therapy for the prevention of early postmenopausal bone loss. Calcium supplementation may have had a minor effect on the loss of cortical bone, but it had no effect on the trabecular bone.

This is the note now being sounded by most researchers. Many of the latter stress that it is the diet in the years of youth that has most significance for bone health in late adult years. The golden remedy again is not a remedy, but prevention. Those who eat mainly a vegetarian diet and who exercise regularly in the sunshine are not likely to suffer from osteoporosis.

**QUESTION:**
What do you think of substitutes for dairy cream?

**ANSWER:**
Nutritionally, they are worse than cream. Any artificial compound is suspect, but one with as much or more saturated fat as the original is especially so.

**QUESTION:**
Why is it that in developing countries the abandonment of breast-feeding has almost become a stampede?

**ANSWER:**
The cause is the greed of western commercial giants who provide and advertise the second-class product. Cornell University physician, Michael C. Latham, observed that for a mother to give up breast-feeding and substitute the bottle was "tantamount to signing the death certificate of the child."

**QUESTION:**
Millions of women still bottle-feed their babies. What is the current medical view of this habit?

**ANSWER:**
In the Third World the practice is considered to be perhaps the chief cause of unnecessary deaths. No informed researcher or medical person today denies the absolute superiority of breast-feeding. While there will always be some who cannot breast-feed and must do the best they can, those who are able to breast-feed and do not, may be responsible for more potential harm to their child than if they physically abused it.

*The New England Journal of Medicine* of October 27, 1977, had this to say:

> The relative consequences of the two methods were considered to be of no real importance in modern urban society, and, in any case, the practitioner had learned nothing concerning the process in his training. In practice, therefore, until recently the endorsement of breast feeding was likely to have been lukewarm, ambivalent and ill informed about the properties of human milk and the mechanisms responsible for lactation. By contrast, the well funded formula industry had obligingly filled the vacuum, and assumed the role of Delphic oracle, saturating both the profession and the public with astutely presented information, propaganda, persuasion and motivation.

In the past five to 10 years, the situation has changed dramatically as a flood of striking new scientific facts from a wide spectrum of disciplines has been jolting the torpor and complacency of the health professional and questioning the hubris of food technology.

... The constituents of human milk and cow's milk are dissimilar in almost all respects, with the exception of water and lactose. (p. 912)

... An increasing flow of investigations in the last few years has shown human milk to be rich in a wide range of humoral "host resistance factors..."

The anti-infective properties of human milk are life saving with poor home hygiene. However, recent work also shows important protective effects, even in well sanitized industrialized circumstances...

Breast-feeding (and the avoidance of the introduction of semisolids until four to six months of age) is the best prophylactic against food allergy in infancy...

... Biologic breast feeding (with sucking throughout the 24 hours and without other foods offered) produces effective child spacing through endocrinologic effects, largely medicated through the prolactin secreted from the anterior pituitary as a result of sucking the breast... (p. 913)

As a curious aberration, Western concepts of infant feeding have held bottle feeding and breast feeding to be interchangeable phenomena emotionally and psychophysically. Plainly, they are not; the direct dyadic interactions are obviously different – for example, those of maternal hormone secretion and neonatal somatosensory, olfactory and auditory stimulation.

Maternal neonate bonding – that is, the formation of intense attachment – has been shown to be related to contact leading to mutually reinforcing reflex behavior, occurring most readily during a sensitive period in the first 24 hours of life, especially with biologic breast feeding. The probability of "disorders of mothering," including subsequent child abuse, may increase in women who do not experience this bonding experience, and the absence of close mother-baby interaction can be one factor in the later development of psychosocial maladjustment in the child... (p. 914)

It is quite clear that breast-fed infants have fewer gastrointestinal infections than infants fed the best available artificial formulas. But far more significant is the psychic value of breast-feeding which prepares the child to view the world with equanimity. The security engendered by breast-feeding is probably the best inheritance any mother could give her child, while the physical benefits are also clearly "worth more than a million."
Is trichinosis a thing of the past? Does one need to be careful with pork?

Recurringly over the years the government has issued warnings in connection with trichinosis. In *The New England Journal of Medicine*, of September 7, 1978, p. 555, Dr. Peter M. Schantz of the Centers for Disease Control, Atlanta says:

... in the United States the burden of responsibility lies with the consumer to prepare fresh pork in such a manner as to destroy the larvae that may be present in one of every 1,000 marketed hogs, and knowledgeable foreign tourists will continue to warn one another about the dangers of eating American pork.

On the same page, from Dr. Harry Most of the New York University Medical center, comes this comment:

In the late 1800's several European countries insisted that the pork that they imported should be specifically inspected to determine whether the meat contained trichinellae. Such inspection, however, was later discontinued, and the meat-inspection law passed in the Congress in 1906 contained no provision for micro-scopical inspection of trichinellae. The official stamp, "U.S. inspected and passed" does not, therefore, include any inspection for, or guarantee any freedom from, trichinellae in the meat so stamped.

Some people seem to take an excessive amount of individual nutrients in tablet form. Is this wise?

In most cases it is not wise. Nutrients work together, and it is rare that any single nutrient is a specific to accomplish on its own a curative task. If ten food elements are missing from the diet and one is provided in abundance, in most cases it does no good whatever because of the missing nine. Furthermore, excessive amounts of some nutrients imbalance the body's utilization of other elements. Too much zinc hinders the action of copper in the human system, and excessive vitamin C can be dangerous for a vegetarian, for it is destructive of vitamin B12.

Is there danger in eating raw fish such as sushi, sashimi, and ceviche?

If the raw fish are examined very carefully prior to fastidious preparation for eating, the risk is decreased. In recent years there has been an increase in reports of tapeworm and roundworm infection from fish especially on the west coast. Fish are well known as carriers of a variety of parasites, certain of which are deleterious for humans. The danger exists not only with freshwater but also with marine fish.

Is the meat used in fast-food restaurants cooked adequately to prevent parasitic infection?

In *The New England Journal of Medicine*, of October 24, 1985, there is a letter from three physicians on this very topic. We quote:

To the Editor: Toxoplasmosis is one of the most diffuse parasitoses in the world. The responsible parasite Toxoplasma gondii is found in cattle as well as in sheep and pigs. The changes in food preparation and eating habits that have taken place throughout the world in the past few decades have increased the risk of human infection with T. gondii through consumption of "fast foods" and rare or raw meat.

Experiments show that some of the most common ways of preparing meat are not able to destroy any toxoplasmic cysts that may be present, because the necessary temperatures are either not reached at all or not maintained long enough (60 degrees C for 10 minutes) to make the cysts noninfectious. (p. 1092)

What do you think of sugar substitutes?

Inasmuch as many dietary additives may only manifest their impact after years, it may yet be too early to pronounce all sugar substitutes as safe. Most researchers think the danger is not great for the majority of people if used moderately. Aspartame is the chief product in this area and has been pronounced safe by the medical establishment. More recently reports have come of allergic reactions to aspartame for a small minority of people. It is certain that both phenylalanine and aspartic acid which are the ingredients of aspartame are toxic in large doses. A small child who drank a two-liter bottle of diet cola would be consuming more aspartame than the FDA has recommended as safe. According to Dr. Louis Elsas, director of Medical Genetics at Emory University, pregnant women, nursing mothers, and infants under six months should use no aspartame because phenylalanine in sufficient amounts can damage the fetal brain irreversibly.

Are there any sulfite-free wines?

...
Not on the American market. Therefore, if you are sensitive to sulfites, avoid wine. We personally believe that there are other good reasons for that course. For example, even so-called nonalcoholic wines and beers do have some alcohol content (though labeled alcohol-free which is permissible when the content is less than .5 percent) and can start a recovering alcoholic back on his former dead-end road.

QUESTION:
How can you tell if the food in restaurants has sulfites?

ANSWER:
Contact Center Laboratories, 35 Channel Drive, Port Washington, NY 11050, which sells test strips. Dipped into the food these strips change from white to pink if sulfites are present.

QUESTION:
Is a milk diet still used in ulcer therapy?

ANSWER:
Not as widely as it once was. Since 1958 well-read physicians have known that milk does not help an ulcer to heal. Actually milk increases the acid production in the stomach. Milk is a splendid emergency food, but man is the only creature that consumes milk after he has been weaned, and the only one that takes milk from another kind of animal.

QUESTION:
Can you name a recent book discussing vegetarianism versus a meat diet?

ANSWER:
Why You Don't Need Meat, by Peter Cox, a British book printed by the Thorson's Publishing Group, Wellsborough, New York, in 1986, is excellent. It is clear, cogent, and well documented. See also the books of Dr. John A. McDougall.

QUESTION:
I understand that drugs can be used to combat both cholesterol and hypertension. Is this the best way to go?

ANSWER:
In the words of researchers Jeremiah and Rose Stamler:

Given that all antihypertensive drugs have adverse as well as beneficial effects, the end point outcomes with the safe and nutritional and hygienic methods, skillfully and successfully used, control high blood pressure better than with drugs ... There is a broad consensus on the role of diet and exercise in the management of high blood pressure.


Drugs have a part to play in extreme hypertension, but moderate hypertension can be treated by changing the diet of the patient, encouraging him or her to lose weight and to regularly exercise.

QUESTION:
Is not a vegetarian in danger of vitamin B12 deficiency?

ANSWER:
Traditionally, the answer has always been yes. But the number of instances in medical literature of proven deficiency because of a vegetarian diet is not great. Furthermore, there are untold millions in the world who are pure vegetarians, i.e., who eat nothing but foods of vegetable origin, and yet do not suffer from B12 deficiency. Such, for example, is the case with all strict Hindus. B12 is needed only in very microscopic quantities. It is thought by some researchers that an adequate amount is synthesized by the human organism, but this has not yet been adequately proven. B12 has many sources. It even exists on the outside of the skin of potatoes in many instances unless the washing of them has been meticulously performed. There is a large amount in some nonanimal foods, such as fermented soy products like tempeh which can be purchased in many supermarkets. Those who use a minimum of animal products such as milk, eggs, and cheese are in little, if any, danger. The body stores B12 when it is available, and these reserves are usually adequate for about five years or more.

QUESTION:
Fish oils seem all the rage. What do you think of them?

ANSWER:
There is no question but that fish is a better item of diet than red meat, apart from the usual risks of mercury, ciguatera (not widespread), etc. But the fact that drug manufacturers and health-food companies are jumping on the bandwagon to make a fortune through the new fad is no reason to jump with them.

Most foods should be used in harmony with the principle "What God has joined together, let not man put asunder." The refining of foods violates this principle and the making of pills from fish oils is also a refining process. Whether omega-3, the special oil, conveys benefit by itself is as yet unknown. It may be that only in combination with other elements in the fish is it beneficial. This is often true in many areas of nutrition. Large amounts of zinc taken as a supplement endanger the copper balance, as large ingestion of phosphorus endangers calcium balance, etc.
The chief nutritional researchers today recommend fish rather than fish-oil pills, and furthermore, they do not recommend large consumption of fish but only two to three servings a week. Omega-3 oil does contain a considerable amount of cholesterol. (See JADA 86:788, 1986). This is true of all commercial fish oils. Salmon oil contains 485 mg. of cholesterol in every 100 grams, while herring oil contains 766 mg.

QUESTION:
You are very dogmatic on the relationship between excessive cholesterol, saturated fats, and chronic disease. Are you sure such dogmatism is justified?

ANSWER:
The dogmatism to which you refer is being manifested today by government committees on public health all around the world. The New England Journal of Medicine, of January 12, 1978, p. 108, cites Dr. Thomas M. Vogt of the UCLA School of Public Health. He writes: "The evidence is overwhelming that coronary atherosclerosis and stenosis are related to the dietary intake of saturated fat and cholesterol." So say the vast majority of health professionals since the results this decade of the most expensive medical experiment of history (costing $165 million).

QUESTION:
If Christ ate fish and provided it for the multitude, why should any wish to urge proximity to a vegetarian diet?

ANSWER:
Twenty-first-century pollution includes our water systems, rivers, and oceans. To secure disease-free fish is becoming more and more difficult. Many fish used for human consumption have derived their food from city sewage outlets. Others absorb pollutants from industrial centers. Mercury is a considerable problem in many parts of the world, and pesticides also. The higher something ascends the living chain, the more concentrated become the absorbed chemicals. For these reasons one would not be wise to use large amounts of fish regularly. This is not to deny the superiority of fish as a food over red meats which also are far from disease-free.

QUESTION:
You talk about animals in the wilds not being fat. Some of those I have seen in pictures certainly do look very heavy, indeed, with plenty of adipose tissue. What about that?

ANSWER:
In their book Saccharine Disease, Drs. T. L. Cleave and G. D. Campbell, tell us the following on this point:

A glance at any wild creature in its natural environment shows that no matter how plentiful its food supply, it never eats too much of it ... no wild rabbit ever ate too much grass; no wood-pigeon ever ate too much wheat, and no herring ever ate too much plankton. No wild creature, in fact, is ever overweight ... in nature organisms react to an abundant food supply, never by developing a disease, such as obesity, but by raising the rate at which they propagate themselves.


This contention must be supported by the well-known fact that certain wild animals do carry considerable weight for such reasons as buoyancy, warmth, and hibernation. These reasons are physiological and not pathological. Sometimes visible muscle is misinterpreted by the viewer as fat.

QUESTION:
I have always been told that I need to avoid carbohydrates if I want to avoid overweight. Is this advice sound?

ANSWER:
No. Consider this statement from The Lancet of October 1, 1983:

The previous nutritional advice in the UK to limit the intake of all carbohydrates as a means of weight control runs counter to current thinking under the present proposals for a nutrition policy for the population as a whole. It is important, therefore, that a key feature in nutritional education should deal with counteracting results of decades of teaching aimed at reducing carbohydrate intakes ... Weight control is best achieved with a low-fat diet.

This particular report stressed the fact that carbohydrates rich in fiber are nutritionally desirable, but sucrose (sugar) consumption in large amounts is not at all wise. The Lancet further warns about consuming drinks other than water between meals, and sweets, and snacks. It is the fat that is usually added to carbohydrates that helps to promote obesity, not the carbohydrates themselves.

QUESTION:
Is it true that one can catch salmonella from eating chicken?

ANSWER:
There are millions of cases of salmonella disease annually in this country. More than one-third of chickens are infected, and if they are not thoroughly cooked, or some other hygienic precautions are not taken, the disease can readily be transmitted. If knives used to cut up chicken are used on other foods, the way is paved for salmonella poisoning. This happens times without number every day in every large city.
Should all this business about so-called natural foods really be taken seriously?

ANSWER:

The New England Journal of Medicine, February 2, 1978, published a letter replying to a similar inquiry. We quote a portion of it:

Dr. Jukes's prejudice against people who are preoccupied with "natural foods" causes him to be relatively blind to the real but as yet unquantifiable risk posed by mass distribution of synthetic chemicals in our foods. He glosses over and underplays the plethora of risks, particularly regarding carcinogenicity. He omits mention of the increasingly widespread belief in the scientific community that most human cancer today is induced by manmade "environmental," not genetic or viral, factors. The potential for harm here is not immediately obvious since the effect of the environment on cancer is not instantaneous; 10 to 30 years are usually required from exposure to cancer incidence or mortality (or both).

One must admit that, as far as low-dose exposure over long periods is concerned, the toxicity of most chemical additives is essentially unknown. They constitute at least a vast potential reservoir with an indeterminate risk. (p. 286)

QUESTION:

I have seen a lot of popular books talking about the need for eating fiber-rich foods. But do the medical journals see importance in this also?

ANSWER:

British workers in Africa noted the remarkable rarity among rural blacks of diabetes, ischemic heart disease, hiatus hernia, appendicitis and colonic diverticulosis, polyps and cancer; other ethnic groups in Africa eating western-type diets and enjoying more nearly western life-styles manifested these disorders in frequencies approaching those seen in Europe and North America. These workers speculated that the crucial difference between the lifestyles of rural blacks and those of the more westernized groups was in their diet, particularly in the amounts of "roughage," or "fiber," consumed. To Trowell is owed the physiologic term "dietary fiber," which he most recently defined as "the plant polysaccharides and lignin which are resistant to hydrolysis by the digestive enzymes of man." Two excellent books giving the necessary background for an understanding of this subject are currently available: one by the pioneers Burkitt, Trowell and their associates; and one, representing a more laboratory-oriented and nutritionally based look at the subject, edited by Spiller and Amen.


QUESTION:

Must I give up my use of coffee?

ANSWER:

Everything depends upon how much you value your health. Researchers disagree on the issue, but there are none that think that coffee adds to your health. In JAMA of March 8, 1985, p. 1407, we read: "Male heavy coffee drinkers have lipoprotein profiles suggestive of increased cardiovascular-disease risk, although the causality remains to be determined." This is a typical statement and underlines the fact that not all the evidence is in, though it seems very clear that the heavy use of caffeine is dangerous.

QUESTION:

Should I use milk for my stomach ulcer?

ANSWER:

Such was advised years ago. But actually it does more harm than good and that is now widely acknowledged. Milk is rich in protein and calcium, both of which stimulate the production of acid in the stomach. One of the problems with the bland-diet approach is that it excludes fiber. But a certain amount of fiber is necessary for good health. Many of the old views about treatment of ulcers have proved erroneous. It is no longer considered necessary to eat several small meals throughout the day. Three well-spaced meals are adequate. Eat an abundance of natural foods, but make transitions slowly.

QUESTION:

Does soil, if it is poor in composition, rob its plants of vitamin content?

ANSWER:

Obviously something is going to suffer, because the soil has nothing to give the plant except its own ingredients, and if these are below par, so will the plant be. But most experts believe that the vitamin content of a plant is largely determined by the plant's heredity. And that a poor soil will result in a smaller, lesser crop rather than a crop void of vitamins. However, the mineral content of the plant invariably will be less in poor soil.

QUESTION:

Is it true that where there is much stress there is a greater need for vitamins?

ANSWER:

Yes. Though the debate is not concerned with that fact but with the amount of extra vitamins that is required. Most nutritionists believe that the need indeed is greater with stress, but not so great that proper eating cannot provide it.
Does vitamin C in large amounts help prevent colds?

ANSWER:
Dr. Linus Pauling believes so, but most researchers have their doubts. The latter believe that 250 mg. a day of vitamin C will alleviate cold symptoms to some extent, but not prevent colds. The best way to prevent colds is to maintain one's immune system at its highest level by obeying all the laws of health. This will involve getting enough exercise, rest, sunshine, fresh air, and avoiding refined and fatty foods. Emotional stress seems to pave the way for colds in susceptible people.

QUESTION:
Is it possible to eat heartily and still be lacking in certain minerals and vitamins?

ANSWER:
If you eat refined and processed foods, the answer is yes. Dr. Sheldon S. Hendler, of the University of California, San Diego School of Medicine, declares: "As a nation, we are overfed and often seriously undernourished."

QUESTION:
Is it possible that the food we eat can even affect our mental processes and behavior patterns?

ANSWER:
Notice the words of The Lancet, May 21, 1983:

Most drugs that modify normal or abnormal behaviours do so by changing the amounts of particular neurotransmitters present within brain synapses or by influencing the interactions between transmitter molecules and their postsynaptic receptors. If a food constituent can be shown to cause similar changes in the release or the actions of one of these neurotransmitters, there is every reason to expect that that nutrient will also be able to influence behaviour (or to modify other processes controlled by the brain, such as neuroendocrine secretion and various autonomic functions). Certain food constituents do affect the rates at which neurons synthesise and release the neurotransmitters produced from them. One such nutrient, tryptophan, can readily be shown to affect behaviours. (p. 1145)

QUESTION:
Many are now calling for changes in our diet and in our physical habits. Are these recommendations so radical that they violate our heritage and culture?

ANSWER:
JAMA, of April 12, 1985, p. 2094, took up that very question, and they offer the following data in answer:

(1) From 1910 to 1972, the dietary intake of fat increased 25% in the United States and that of carbohydrate decreased 25%. The intake of complex carbohydrates declined by more than 50% and that of simple sugars increased. As a result, the ratio of complex to simple carbohydrates declined by more than 60%. (2) From 1925 to 1940, the annual consumption of cigarettes per US citizen 15 years of age or older increased from 1,000 to 2,000, and in 1960 it had increased to 4,000. In 1973, the total consumption of cigarettes was 590 billion. (3) The number of automobiles per 1,000 persons is significantly related to the coronary heart disease mortality. Obviously, the use of automobiles increased precipitously after the 1930s. It is reasonable to conclude that physical inactivity also increased, because one had to exercise less and less as a part of one's daily life.

QUESTION:
It seems to me the way of life you are advocating as regards diet is a very strange, unheard-of one. Is my reaction too extreme?

ANSWER:
The words of Dr. Denis Burkitt offer as good a reply as any:

Remember, that until 100 years ago, the whole of the world lived only on this food plus green vegetables for the few weeks or months in the year when they could be picked fresh. There were no means of storage, and for the rest of the year people lived on what they could put on the floor of the barn, and that was all cereals, legumes and tubers. Vegetarian Times, Issue 46, p. 31.

When Dr. Burkitt referred to “this food” he meant grains, tubers, and legumes.

QUESTION:
What do you think about the marketing of vitamin and mineral supplements by the recently formed United Sciences of America Incorporated?

ANSWER:
See The New England Journal of Medicine, October 9, 1986, and May 7, 1987 on this subject. On pages 1220-1221 of the latter issue, one medical correspondent writes:

USA, Inc., is marketing a food supplement that they imply will help to prevent arteriosclerosis and heart disease. The tragedy is that many Americans will believe them. They will buy the supplements and take in large amounts of extra fat in the form of omega-3 unsaturated fatty acids, without also reducing their intake of saturated fat. As far as I know, there is no evidence that adding extra fat of any kind will prevent coronary artery disease.
This is similar to taking extra corn oil (omega-6) with each meal, instead of substituting the unsaturated fat for saturated fat. Not only is there no evidence that doing this will prevent coronary artery disease; there is evidence that taking extra corn oil may increase the chances of certain types of cancers and gallstones will develop. Similarly, taking large amounts of fish oil lowers blood concentrations of platelets and may increase the risk of cerebrovascular accidents ... Finally, the consumption of large amounts of fish oils has been shown to increase sensitivity to catecholamines and to cause myocardial necrosis and death in animals ... It is deceptive to recommend fish-oil supplements without also suggesting a change in diet.

This statement by Dr. Gabe Mirkin should be pondered by all considering the new fad in fish-oil supplements. We believe that these opinions of Dr. Gabe Mirkin contain much nutritional sense.
CHAPTER 55
Questions and Answers on Specific Diseases
He who cures a disease may be the skillfullest, but he who prevents – that is the safest physician.
T. Fuller

* * * *

QUESTION:
You have quoted Bailar and Smith as saying that, overall, the major cancers have not been reduced as a result of medical research. Is this viewpoint gaining ground? It seems opposite to all popular presentations that I have heard.

ANSWER:
The view itself is not good news and therefore hardly popular. But an increasing number of researchers grant its truthfulness. One very vocal researcher, Samuel S. Epstein, in a letter in The New England Journal of Medicine, of March 19, 1987, p. 753, says:

> Overall cancer incidence has increased sharply, at the rate of 1 percent annually since 1970 and at similar rates as that for lung cancer alone. Incidence rates have also risen sharply for cancers unrelated to smoking, including breast and colon cancer and acute adult nonlymphatic leukemia; only about one-third of the overall increase is due to respiratory cancer.

> There is ample support for the growing perception that we have lost the war against cancer and that national policies and priorities, including those of the major concerned institutions – the National Cancer Institute and the American Cancer Society – must be redirected from currently imbalanced and overly optimistic emphasis on chemotherapy and treatment into more promising areas of prevention and control.

QUESTION:
You have said so much about heart disease and cancer. Are these really so prevalent as to merit all this attention?

ANSWER:
Almost three-quarters of the population of North America are dying from atherosclerosis and cancer. While the former is taking considerably less lives now than twenty years ago, it remains the chief killer in the Western world. Because recent decades have stressed the dangers of animal fats and the necessity for exercise and the folly of smoking, real improvement has been seen in the area of coronary heart disease. But combined with strokes the toll is almost a million people a year in this country. We rightly make much ado about the road toll, but it is but approximately 5 percent of the toll of atherosclerosis. Similarly, we appropriately protested against our Vietnam dead, but the total of those years is also only approximately 5 percent of the annual death toll from atherosclerosis. The cold, brutal facts are that for people living in this country the chances are 3 out of 4 that they will die decades earlier than necessary because of one or the other of these diseases. The tragedy is that most of these deaths are quite unnecessary – we know how they can be avoided. In the American Journal of Medicine, February 27, 1984, W. P. Castelli made a report entitled "Epidemiology of Coronary Heart Disease: The Framingham Study," in which he said:

> Coronary heart disease continues to be the number one cause of death in most northern Europeans, North American and other industrialized Caucasian societies. By the age of sixty, every fifth man and one in seventeen women have some form of this disease. One in fifteen men and women will eventually have a stroke. Other cardiovascular diseases related to atherosclerosis are also important. Epidemiologic (prospective) studies enable one to predict most of the potential victims of cardiovascular disease, years before they become ill. An increase in total to high-density lipoprotein cholesterol ratio, hypertension, cigarette smoking, excess weight, elevated blood sugar levels, lack of exercise, stress, electrocardiographic abnormalities, and other factors are associated with the development of these diseases. (p. 4)

QUESTION:
If heart disease is so epidemic in this country, what about other industrialized lands such as Japan?

ANSWER:
Most industrialized nations do have a high rate of coronary heart disease. But in Japan where blood pressure levels are very high, coronary disease remains rare because cholesterol levels are extremely low. That has been the picture for decades but it is beginning to change. In this decade, there has come an increase in fat intake from the 20 to 30 grams of fifteen to twenty years ago, to almost 60 grams a day now in the large cities of Japan. So coronary heart disease has begun to rise commensurately.

QUESTION:
Is it true that the ingestion of aluminum may contribute to Alzheimer's Disease?

ANSWER:
Some researchers believe that to be the case. Remember that aluminum is used freely in the food and drug industry, over 4 million pounds a year. Antacid powder is a popular form by which aluminum is ingested, but there are many others, especially processed foods. Genetic abnormalities may be a crucial factor in many instances.
QUESTION:
Do we have any clues yet about the causation of multiple sclerosis?

ANSWER:
Some researchers point out that there are strong geographic correlations between heavy use of dairy products and multiple sclerosis. So far we know little about the disease as regards cause and cure.

QUESTION:
Is there such a thing as getting leukemia from animal viruses?

ANSWER:
According to the magazine *Nature*, Vol. 320: March 20, 1986, p. 219, "Milk from cows shedding BLV (bovine leukemia virus) has caused leukemia in chimpanzees and there is epidemiological evidence linking cattle herds infected by this virus with human leukemia. Therefore, it seems likely that BLV can be transmitted in dairy products and cause disease in humans." Some consider that certain patients with multiple sclerosis may have BLV infection.

QUESTION:
Can the AIDS virus survive outside the body, infecting by casual contact?

ANSWER:
That is the trillion dollar question in our day. No certain answer is yet available. Various researchers suggest that the virus can survive for several days outside the human body. There are thousands of people with AIDS that do not fall into anyone of the high-risk groups and thus the question must arise as to how they contracted this dreadful disease. As far back as 1982, the Centers for Disease Control in Atlanta issued precautions for medical workers caring for AIDS patients, and these precautions included the warning that gloves should be worn when handling blood specimens, blood-soiled items, body fluids, excretions, and secretions, as well as surfaces, materials, and exposed objects. The Center also advised that hands should be washed after removing gloves and before leaving the rooms of known or suspected patients, and that gowns should be worn when clothing was exposed to possible soiling with body fluids, etc.

Rock Hudson's nurses in Paris were made to burn their dresses, and the patient was fed on paper and plastic plates, with plastic forks and spoons that were later destroyed. We do know that hepatitis B is infectious through continual, close personal contact, as in households. We also know that the epidemiology of the AIDS virus is very similar to that of hepatitis B.

A recent book on AIDS, which is well documented despite its rather spectacular title (*The AIDS Coverup?*) quotes the *Wall Street Journal*, August 5, 1985, as saying that a study in Zaire indicates that those who live under the same roof with an AIDS sufferer have a 300 percent higher risk. Even the *Journal of the American Medical Association*, despite its downplaying of the likelihood of casual transmission, admits that indirect evidence suggests that if a person is frequently exposed to someone who has the AIDS virus, there is a greater chance of being infected. See the edition of November 22, 1985, and the article by Dr. Fauci.

Dr. Mark Whiteside and Dr. Carolyn MacLeod, of the Institute of Tropical Medicine Miami, have suggested that mosquitoes are a vector in the AIDS outbreak of Belle Glade, Florida, though others deny that likelihood.

*The Lancet* edition of February 15, 1986, reported that there is a potential risk in the fitting of contact lenses and in cleaning lenses, and in tonometry in general, because the AIDS virus has been found in tears. The author of *The AIDS Coverup?* also quotes Dr. James Slaff, medical investigator at the National Institute of Health, as reporting that: "Unlike most other retroviruses, the AIDS virus can survive outside the body for hours to days" (p. 109). Similarly, *The Lancet*, of September 28, 1985, is quoted with the study by a team of French researchers from the Pasteur Institute affirming that the AIDS virus can remain infectious outside the body for up to ten days. Two months after *The Lancet* statement, the *Journal of the American Medical Association* commented that "The French study finds that the virus survives ten days at room temperature even when dried out in a petri dish."

We also know that about 6 percent of the reported infants and children with the disease have no known risk factor. At present, it must be confessed that the situation is not clear-cut but that caution is called for.

QUESTION:
When was the decades-old issue about cholesterol and CHD resolved?

ANSWER:
It was in January 1984 that the National Heart, Lung, and Blood Institute released its findings after a ten-year, $150 million study of heart disease among 3,806 middle-aged American men, all of whom had elevated cholesterol levels to start with. This government-sponsored study was conducted at twelve medical centers in the U.S. and Canada, and the conclusions were summarized in a thirty-nine page report in mid-January 1984. The report was emphatic that the lowering of cholesterol also lowered the risk of heart attack, and that for every 1 percent drop in the cholesterol level in the bloodstream, there was a 2 percent decrease in the likelihood of a heart attack.

QUESTION:
Is it worthwhile using drugs for mild hypertension?

ANSWER:
At a Virginia regional meeting of the American College of Physicians last year, Dr. Robert P. Goodman said that it remains unresolved whether existing therapies for mild hypertension reduced morbidity. Because mild hypertensives account for more
than two-thirds of the nearly 60 million Americans with high blood pressure, the issue is an important one. More and more researchers consider that diet and exercise are to be preferred to the use of drugs for mild hypertension. There is certainly no clear evidence that mild hypertensives benefit from drug therapy. See Internal Medical News, April 15-30, 1986, p. 18.

**QUESTION:**
Do we have specific medical intervention to thank for the large decline in heart disease?

**ANSWER:**
According to Dr. Beaglehole, in a report given at Auckland, New Zealand, in 1986, specific medical interventions account for only a minor part of the decline in heart disease. He said, "The newer secondary preventive measures, such as coronary, angioplasty thrombolytic treatment will not substantially influence future mortality." See Internal Medicine News, April 15-30, 1986, p. 13. Most researchers agree that it is changes in diet and smoking habits which are much more important in the reduction of CHD deaths than medical intervention.

**QUESTION:**
How expensive to us as a nation is alcoholism?

**ANSWER:**
About 13 billion is spent annually on alcohol-related medical and hospital care. Our worst expense is that of human life. For the Surgeon General has asserted that alcoholism contributes to more than 10 percent of all deaths in the U.S. It is now clear that there is an association between alcohol consumption and heart disease, and for women alcohol can trigger breast cancer.

**QUESTION:**
Is it universally agreed upon that overweight can cause disease and premature death?

**ANSWER:**
Yes. Except where sickness or smoking is the cause, the thinner one is – the longer one should live. As popularly expressed, the longer the waistline – the shorter the life-line. This conclusion is based on a multitude of studies, including the data collected from 1950-1972 from over 4 million insurance policies. Three national health surveys (National Health Examination Survey, 1960-1962; National Health and Nutrition Examination Survey 1, 1971-1974; and National Health and Nutrition Examination Survey 2, 1976-1980) have provided data on weight, height, skin-fold thickness, etc. The Framingham Study and many others add to the data base. Results show that more than 80 percent of men above the age of forty and about 70 percent of women are in the elevated risk category because of overweight. Furthermore, these percentages are continuing to rise in women at higher weights and are rising in men at younger ages. It should be kept in mind, however, that body weight of itself is not a measure of obesity. Weight must be related to the more appropriate measures of body fat. In some men, heavier weight is the result of well-developed musculature. Body weight must always be calculated with reference to height also.

It must be stressed that the thinness which is caused by smoking should not be regarded as healthy. Of every four thin, middle-aged men, one will probably die of lung cancer.

The fact that the majority of people in the Western world are overweight is a testimony to their inadequate diet and their failure to exercise. Proper weight is not an esoteric matter. It requires no complicated regimen or magic talisman. It is a matter of eating unrefined foods and exercising adequately.

**QUESTION:**
Is it possible for elderly people over seventy to acquire AIDS by infrequent heterosexual contact with someone with the virus?

**ANSWER:**
Just such an instance is recorded in Annals of Internal Medicine, January 1984, p. 62ff. The patient concerned was a seventy-one-year-old previously healthy woman, who led a remarkably secluded life with her husband. The journal comments that "Monogamous and infrequent sexual contact as well as the absence of other risk factors in the patient is evidence against the theory that frequently repeated stimulation with multiple antigens (as occurs among promiscuous male homosexuals) is necessary for the Acquired Immuno Deficiency Syndrome to occur."

**QUESTION:**
What percentage of people who have the virus of AIDS will ultimately die from it?

**ANSWER:**
No one knows for sure. In the early years of the epidemic it was thought that perhaps 20 percent might die. The figure then rose successively until researchers are now suggesting that more than 75 percent will die. As far back as January 1984, some researchers wrote that "The mortality may well approach 100 percent, making this one of the most extraordinary transmissible diseases in history." Annals of Internal Medicine, January 1984, p. 92.

**QUESTION:**
Can monogamous women who do not use intravenous drugs contract AIDS from a bisexual partner?

**ANSWER:**
Yes. And this has happened repeatedly.

**QUESTION:**
In view of the varying incubation periods for AIDS, could it be that the state of the immune system is decisive in that area?
So some researchers think. For example, "Nutritional status markedly influences immunocompetence ... Pneumocystis carinii, an opportunistic pathogen frequently seen in patients with the syndrome, is recognized as a significant health hazard in malnourished children. Deficiencies of specific nutrients such as zinc profoundly influence immunocompetence ... Nutritional deficiency ... may represent an important facilitating factor, helping to omit the establishment of a principle effective agent." Dr. Richard S. Beech, *Annals of Internal Medicine*, October 1983, pp. 565-566.

**QUESTION:**
Can anorexia nervosa be fatal?

**ANSWER:**
It is fatal in 4 to 30 percent of patients. Some of these deaths are quite sudden and unexpected. Electrocardiographic surveillance is necessary for patients with extreme anorexia nervosa. There should be no delay in finding a skilled counselor for someone with this disease, preferably a Christian psychiatrist. Let it be noted that those who choose very low-calorie diets to produce rapid weight loss are taking grave risks. Those who undertake drastic weight-reduction programs are at considerable risk for arrhythmic death.

**QUESTION:**
What has led to the strong emphasis upon annual screening for cervical cancer?

**ANSWER:**
Physicians consider that many younger women are more sexually active now than women in the past and tend to have more than one partner and, therefore, it is considered that such women between the ages of eighteen and thirty-five are at high risk for cervical cancer. But women beyond that age who have already had normal Papanicolaou Smear test results need thereafter be screened only once every five years. It must be admitted that other researchers question the value of the screening at all because of the possibilities of false negatives and false positives.

**QUESTION:**
Does candida also affect the central nervous system as well as the food canal, urinary tract, and the vagina, etc.?

**ANSWER:**
According to autopsies in recent years, the incidence of candida infections in the central nervous system and elsewhere has increased dramatically. According to an article in the *American Journal of Medicine*, January 18, 1984, p. 101:

As a result of widespread use of aggressive chemotherapy, parenteral hyperalimentation, corticosteroids, and immunosuppressive therapy, and increasing intravenous drug abuse, many more patients have a sustained risk for the development of opportunistic mycotic infections than in years past. Of those opportunistic fungi infecting immunocompromised hosts, Candida has emerged as the dominant organism.

**QUESTION:**
You have spoken about osteoporosis, particularly in connection with women who are the chief sufferers. What are the risk factors which accelerate osteoporosis in men?

**ANSWER:**
Those who smoke cigarettes, drink alcoholic beverages, or have any associated medical disease known to affect calcium or bone metabolism are at risk for osteoporosis. The risk increases with age. See the article on the subject in the *American Journal of Medicine*, December 1983, p. 977ff.

**QUESTION:**
Is it now well understood among oncologists (cancer specialists) that there is a definite link between nutrition and cancer?

**ANSWER:**
Yes. See, for example, the article "Nutrition and Cancer" in the *American Journal of Medicine*, November 1983, p. 843ff. We quote:

There are increasing epidemiologic and experimental data to suggest that there is a relationship between our intake of certain types of food and the development of various types of cancer. For example, the increased intake of fat and a decrease in fiber content have been linked to the development of colon cancer in high-risk countries. Increased fat intake has also been associated with the development of breast and prostate cancer. The intake of nitrates in food, and their subsequent conversion to nitrites, has been correlated with the development of gastric cancer.

The absence of nutrients such as certain trace elements and vitamins has been correlated both epidemiologically and experimentally with various types of cancer. It is possible that certain types of food or lack of certain trace elements may affect immunologic parameters leading to more susceptibility to cancer.

**QUESTION:**
Is it possible that extreme mental stress can lead to heart arrhythmia and sudden death?

**ANSWER:**
It is not only possible, it is a fact. Sudden cardiac death is the leading cause of fatality in our industrial world, and sudden unexpected, overwhelming mental stress can often trigger that sudden death. Probably the likelihood of such an event is very
QUESTION:
Why is there so much more osteoporosis in western countries than in the Third World?

ANSWER:
Affluent countries consume diets high in fat and protein. Any diet that includes protein intake of more than 15 percent of calories is linked with mineral imbalance. Excess protein hinders calcium absorption. Those who eat heavily of animal products inevitably risk calcium deficiency, and this is the case with multitudes in the West.

QUESTION:
What causes indigestion and what can I do about it?

ANSWER:
Indigestion can be caused by overeating, eating too fast, eating when emotionally disturbed or physically and/or mentally tired, by too many varieties of food at the same meal, by too much liquid, or by working strenuously with mind or body immediately after eating.

Digestion is a delicate affair, as most of us find out after we enter our thirties. Healthy people hardly know they have a stomach (except for hunger pangs), until they are well into their twenties, and not long after that indigestion comes periodically for most people for one or more of the reasons listed above.

One's temperament provides the best clues to one's digestive troubles, next to carefully examining personal habits. Those who are excessively greedy of achievement tend to work strenuously too close to the mealhour on each side. When vitality is heavily drained for one purpose, it is not available for another. To digest a heavy meal takes about as much energy as a moderate day's work and, therefore, one must not be too weary before eating or engage intensely in activity right on top of the meal. On the other hand, to sleep for any longer than approximately a quarter of an hour after partaking of a full meal can also precipitate digestive trouble. Sleep is better taken before the mealhour.

Those who strive to solve family problems at the table are also inviting indigestion. Mealtime should be a sacramental occasion, laced with thanksgiving, joy, and good humor. Not one negative sentence should be allowed expression. Some with weak digestions cannot handle fruit and vegetables at the same meal. Others find too much fiber a problem. Reason from cause to effect, and the time may come when you will forget you ever had a digestive difficulty.

QUESTION:
What can one do to prevent hemorrhoids, or ameliorate them?

ANSWER:
About one-third of adults in this country suffer from this problem. It is in most cases the result of a poor diet and faulty life-style. The majority of cases occur in those who eat mainly refined foods, and live a sedentary life under considerable tension.

For both prevention and treatment, the diet chosen must include an abundance of fresh fruit and whole grains. Avoid packaged and canned foods as much as possible and drink plenty of water in preference to other drinks. Till healing takes place, use the shower for cleansing rather than rubbing with toilet paper, and when the affected area is dry apply zinc oxide powder or paste. Never strain when seeking to evacuate the bowel. It is hard, dry stools that must be avoided, and the eating of natural foods prepared in as simple a way as possible, without added fats, will help. Some historians believe Napoleon lost Waterloo because of hemorrhoids.

QUESTION:
Cardiovascular diseases remain the great “scare.” Are they really avoidable or are many of us genetically destined to a sudden end by heart attack or stroke?

ANSWER:
Probably much fewer than 5 percent of people are genetically destined to an early end through cardiovascular troubles. Some researchers suggest that only one person in hundreds is so menaced. Over 90 percent of all heart attacks and strokes are preventable. The key risk factors are high blood cholesterol, high blood pressure, and the use of tobacco – all of which are under the control of most of us. Keep in mind that the argument over whether cholesterol contributes to heart disease is dead. Not only is cholesterol associated with heart disease, but it causes it. High blood pressure has a similar rating, for coronary heart disease is three to five times more common in people with hypertension (high blood pressure).

If Americans stopped smoking, it would reduce the death toll from heart attacks by about 150,000 people a year. Individual risk rates drop rapidly when a person stops smoking, and within a few years the risk is no higher in the former smoker than the one who has never smoked. But remember that the risk factors are exponential. For example, those with two risk factors have three to four times the risk of heart attack as someone with none.

When one also gives attention to reducing weight, stress, and the typical sedentary life-style most of the risks are thereby eradicated. But never lose sight of the fact that diet is the primary factor. For safety’s sake keep animal products to an absolute minimum and unrefined vegetable foods at the maximum. Seek your primary satisfaction in other areas than food, and eat like an athlete in training as regards quality of food but not quantity.

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What do you think of cancer research?

**ANSWER:**
We are grateful for the good it has produced, but confess that on the whole it has been a failure. Indeed, cancer research has been called "the $20 million failure." Nobel Prize winner, Dr. Linus Pauling, declared: "Everyone should know that the war on cancer is largely fraud." By that he means that more people live off cancer than die from it, because instead of stressing prevention, the circuitous and uncertain method of cure is pursued fruitlessly and endlessly. At every age level cancer is on the increase.

**QUESTION:**
Are chronic diseases really as prevalent as you make out?

**ANSWER:**
One out of two after the age of forty suffers from one or more chronic diseases. In such a developed society as that of Britain where there has been thirty years of enormous use of free drug therapy, the population contains 70 percent of people who report themselves as suffering from chronic ill health.

**QUESTION:**
How early should cataracts be removed?

**ANSWER:**
Consult a good ophthalmologist for one's personal needs. But as a general rule, unless a person cannot read the newspaper, there is no reason for surgery yet. Cataracts take many years to get to the place where surgery is required and some never reach that point.

**QUESTION:**
Is it true that for some people in the chemical industry, exposure to benzine can cause leukemia?

**ANSWER:**
Yes. The evidence is now recognized as incontrovertible. For a long time researchers have recognized that exposure to benzine causes blood abnormalities, including aplastic anemia, and leukemia.

**QUESTION:**
Is osteoporosis such a big deal? I hear it referred to frequently.

**ANSWER:**
Osteoporosis is a silent killer which causes 1.3 million fractures a year and about as many deaths as road accidents. Sadly, it is not a disease that can be cured. It can only be prevented by proper diet and adequate exercise in earlier years. Osteoporosis afflicts about 20 million Americans, most of them women over forty-five years of age. About 40,000 a year die from hip fractures, and about another 20 percent of women sufferers become permanently crippled. For women over forty-five osteoporosis is more common than breast cancer, heart attacks, strokes, diabetes, or rheumatoid arthritis.

**QUESTION:**
Is it agreed that mammography is advisable for routine screening in women under fifty-years of age?

**ANSWER:**
*The New England Journal of Medicine*, in its first issue for 1980, p. 21, declared that "no net benefit for routine screening can be demonstrated in women younger than fifty." The reason for this conclusion particularly is, "There is no safe dosage of radiation" (*ibid.*). This should not be understood to mean that radiation should never be employed. It is a lifesaver in many situations, but it is never without danger.

**QUESTION:**
How widespread is Alzheimer's disease, and how dangerous is it?

**ANSWER:**
Alzheimer's disease afflicts about 3 million Americans – that is about 7 percent of the 27 million people aged sixty-five and upwards. It is irreversible and strikes people of every ethnic and socioeconomic group. It is responsible for 120,000 deaths a year, making it the fourth leading cause of death among the elderly, after heart disease, cancer, and stroke. It is not only devastating for the sufferers themselves, but also for their families. In a sense, it is the cruelest of diseases because it kills its victims twice. The mind dies first, then the body. There is much yet to be learned about this disease, but one practical point that should be considered is that some researchers think that the life-long ingestion of excess aluminum may be a crucial factor for many. However, the truth is much more complicated than just that. Nonetheless, all would be advised to drastically restrict the intake of aluminum, which is so abundantly used. Antacid powders in excess should particularly be avoided.

**QUESTION:**
Is high blood pressure really that widespread?

**ANSWER:**
While the figures of high blood pressure were what they were a few years ago, the answer would have been in the region of about 40 million Americans. More recent opinion has lowered the systolic and diastolic ideal figures, and it is now believed that
well over 60 million Americans have high blood pressure. In The New England Journal of Medicine, of October 2, 1980, p. 817, we read: “By the ages of sixty-five to seventy-four years, three of every four Americans have definite or borderline high blood pressure.”

**QUESTION:**
Is the reason that Third World countries know little about degenerative diseases just the fact that they die of infectious diseases in their early years?

**ANSWER:**
In the words of Dr. Denis Burkitt, "If an African lives to one hundred, he doesn't get coronary heart disease or diverticular disease – those are western diseases, not really degenerative diseases, because they have been shown not to be common in old age in most developed communities.”

**QUESTION:**
I have heard it said by the American Cancer Society that even if you get a major cancer you have a 50 percent chance of being cured. Is this really so?

**ANSWER:**
By "cured" the Society means you have a 50 percent chance of living free of obvious cancer for five years. But the facts are that the cancer does continue long after that period has ended. Cancers are often discovered earlier now, which permits a five-year survival rate, but there's no evidence that people are living longer.

**QUESTION:**
What is the best one can do if he discovers he has a major cancer?

**ANSWER:**
Trust in the providential love and care of our Creator is a constant staff to lean upon. But it is our part to do more than trust. There should be a change of diet to an emphasis on unrefined, unprocessed, fresh foods, using just enough to sustain life and activity. In other words, all the normal laws of life must now be more strictly obeyed. God, who gave those laws, blesses all who obey them, and frequently works wonders for people in their extremity.

**QUESTION:**
Is it true that even moderate use of alcohol can contribute to the risk of breast cancer?

**ANSWER:**
The New England Journal of Medicine, of May 7, 1987, declares, "Almost all of the many acceptable studies have concluded that a higher risk of breast cancer is associated with even moderate drinking." “Over all, the three cohort studies completed to date have shown an approximately 60 percent increase in risk with increases in alcohol intake” (p. 1212). Observe that these results do not come from a single study. Seventeen studies are involved and fourteen of them showed this increase in risk. Those who consume even as little as 5 g. of alcohol per day vastly increase the likelihood of premature death. Thus, The New England Journal affirms that “The risk of breast cancer in women who had one drink or more per day was 60 percent higher than the risk in women who did not drink” (p. 1212). This same article goes on to say that the "risk estimates are probably conservative" (Ibid.).
CHAPTER 56
Questions and Answers on Life-style

Putting the exercise machines in Sky lab II and III (but not in Skylab I) had created a scientifically valid control. Here were three groups of highly trained men in their thirties or early forties, physically on a par, placed in an identical weightless environment doing identical tasks.

Lacking any means of regular exercise, the first Skylab crew returned to earth greatly weakened and perilously close to collapse.

With regular exercise provided, the next crew stayed in orbit twice as long and yet returned with 80 or 90 percent of physical fitness intact in Dr. Buchanan's tests.

The third crew, with the exercise factor intensified, set a record of eighty-four days in space and returned in normal physical shape or even with body condition improved.

There could be no question that exercise and only exercise had preserved the health of the men of Skylab II and Skylab III. Nor could there be any question that lack of exercise had dangerously weakened the men of Sky lab I.

Those of us who will never come closer to space travel than a television screen can nevertheless profit by the example. The weightless experience of these astronauts created, in a short time, the effects of a sedentary, inactive life on ordinary people over a long time. If man cannot live by bread alone, neither can he thrive without regular physical activity.


QUESTION:
Can you give us in a nutshell the secrets of longevity?

ANSWER:
The secrets have been out for a long time and frequently summarized. Dr. George Gallup, towards the end of his book, The Secrets of Long Life said: "Our study has revealed five significant and vital factors that can prolong or shorten our lives: heredity, diet, exercise, temperament and self-indulgences" (p. 145). We would only wish to add religious faith also as a contributing factor.

QUESTION:
I have a great deal of trouble relaxing. What can I do?

ANSWER:
You may be too ambitious, or just a "driven" personality tending towards perpetual overwork. You need to examine your motives, if this is the case, and inquire as to why you work so hard. Or it may be that you are just highly strung, and that you suffer from hyperarousal, a condition in which events that hardly touch other people are taken extremely seriously by you.

Whatever the cause of your problem, the remedy is clear. You must take time to vigorously exercise every day. It is impossible not to relax after prolonged exercise. Second, learn to take brief rests frequently. Happy is that person who is so placed that he or she can just stretch out on a couch or even the floor for a few minutes more than once or twice during the day. The siesta habit in hot countries has much to commend it. Learn also to play good music. Find what music is relaxing to you.

Keep in mind that a certain amount of monotony in daily experience is necessary for a rested nervous system. We should not be under strain and tension continually. The violin has a lesson for us – when its string is too tight it snaps, but if it is not tight at all it will not make music. Life needs a certain amount of tension, but not too much if it is to bring forth music.

Above all, learn to rest in the promises of God, and cultivate the sense of his presence, rejoicing in the fact that he is always enough for our needs. For the physiological aspects involved, I refer you to the excellent books by Edmund Jacobson. If you tend to worry, and that makes you tense, read again and again Carnegie's book, How to Stop Worrying and Start Living. But there's nothing better than the good news of the gospel to make a soul relax and rejoice, so read your Bible regularly, and believe its promises. That God is for us is the most therapeutic of all concepts.

QUESTION:
Can exercise alone prevent heart disease or cancer?

ANSWER:
No. While it is true that the sedentary have an increased risk of both diseases, it is not true that exercise alone can guarantee protection from either. Coronary heart disease can be triggered by a high-fat diet, regardless of how much exercise is pursued. Excessive cholesterol in the blood paves the way for heart attack, regardless of physical activity, even if the nemesis comes more slowly. Neither does exercise fully counter the effects of smoking. High-fat diets are the chief cause of both heart disease and cancer, and those practicing prevention have changed this factor to avoid disease.

QUESTION:
Is it indeed true that more and more doctors are recognizing that health is more a matter of life-style than of medical intervention?
It is meaningless and dangerous to encourage the illusion that health is a birthright of man, and that treatment from disease can be achieved by the use of drugs and by other medical procedures. Like political freedom, freedom from disease should not be regarded as a commodity to be distributed by science or government. It cannot be obtained passively from a physician or at the corner drugstore. Goethe’s words apply here: “What you’ve inherited from your father, you must earn again or it will not be yours.” Health can be earned only by a disciplined way of life … We must be prepared to recognize that an excessive concern with security, with comfort, and with avoidance of pain and of effort has dangerous economic and biological implications – that such concern may, in fact, amount to social and racial suicide.

The Dreams of Reason: Science and Utopias, pp. 93-4

**QUESTION:**
Why is it that so many smokers fail in their attempts to quit the habit?

**ANSWER:**
Nicotine dependence is the chief cause of failure. In other words, there is a physical addiction, with symptoms so intense that they defeat even a strong willpower and cause a frequent relapse of smokers who endeavor to give up the habit. A drastic change in dietary habits could help many of these sufferers. A diet that is low in canned and packaged products, with an emphasis on fruits, vegetables, and whole grains, is the most helpful.

**QUESTION:**
We all have to die of something sometime. So why be so fussy about matters of personal health?

**ANSWER:**
First, because we belong to God, and we owe to him every hour’s service that it is possible to render in this life. Second, because the quality of life is greatly enhanced as a result of disciplined hygienic and sensible habits. Third, we are responsible for our influence and to suggest that life is something that can be treated casually or thrown away can harmfully affect the attitudes and habits of those who know and watch us.

**QUESTION:**
Is it not to be preferred to die abruptly and without prolonged pain as a result of a heart attack, than to grow old and infirm, battling every day with physiological and psychological inadequacies?

**ANSWER:**
The question errs on two counts. First of all, heart disease is usually much more complicated than you suggest. In hundreds of thousands of instances, people with heart disease are enduring a prolonged crucifixion. Just getting through every twenty-four hours can seem a marathon to someone with advanced cardiovascular disease. It can mean frequent hovering on the edge of one's bed, reluctant to begin the long journey to the nearest bathroom. It can mean being fearful of every new stress and strain of the day. And it can mean many other things much worse than these. And the second point is that the question assumes that the alternative to an abrupt death has to be one of prolonged discomfort. This is not the case. Our Maker intended that we should live adequately until the close of life. It is not necessarily the case that we must anticipate a period of years of sickness and pain. For those who obey the laws of life, the chances are excellent that they will function efficiently until the very last days of their allotted time. Then one evening they will go to sleep painlessly to await the call of him who declared himself to be the resurrection and the life.

**QUESTION:**
I get scared when people start talking about eating and drinking. Isn’t it written that the kingdom of God is not food and drink?

**ANSWER:**
Yes. Take this statement from Dr. Rene Dubos, the author of *Mirage of Health*, and the life-science library volume *Health and Disease*:

> It is meaningless and dangerous to encourage the illusion that health is a birthright of man, and that treatment from disease can be achieved by the use of drugs and by other medical procedures. Like political freedom, freedom from disease should not be regarded as a commodity to be distributed by science or government. It cannot be obtained passively from a physician or at the corner drugstore. Goethe’s words apply here: “What you’ve inherited from your father, you must earn again or it will not be yours.” Health can be earned only by a disciplined way of life … We must be prepared to recognize that an excessive concern with security, with comfort, and with avoidance of pain and of effort has dangerous economic and biological implications – that such concern may, in fact, amount to social and racial suicide.

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> It is meaningless and dangerous to encourage the illusion that health is a birthright of man, and that treatment from disease can be achieved by the use of drugs and by other medical procedures. Like political freedom, freedom from disease should not be regarded as a commodity to be distributed by science or government. It cannot be obtained passively from a physician or at the corner drugstore. Goethe’s words apply here: “What you’ve inherited from your father, you must earn again or it will not be yours.” Health can be earned only by a disciplined way of life … We must be prepared to recognize that an excessive concern with security, with comfort, and with avoidance of pain and of effort has dangerous economic and biological implications – that such concern may, in fact, amount to social and racial suicide.

_The Dreams of Reason: Science and Utopias_, pp. 93-4
vital, and we mean 1500 calories of food with minerals and vitamins, not 1500 empty calories. So people who are too ascetic do themselves great harm, and obviously their service for the kingdom of God will be much restricted. Others are erratic in their meal programs and frequently miss meals and thereby invite headache and other problems. I have known what it is on a heavy day of preaching to be so engaged in answering questions between meetings that it was not possible to eat lunch. When that factor was added to many hours of nervous activity such as speaking, the result for me on certain occasions has been a headache of mammoth proportions. Experience has indicated that the likelihood of such an event is greatly intensified if, because of traveling or other circumstances, the previous night yielded little sleep. So let's face it, we are indeed made out of the elements of the ground as Genesis 2:7 declares. Unless we faithfully restore the ravages of time and work by those same elements in the proportions that we need them, this mortal flesh cannot behave aright.

QUESTION:
I haven't seen many cases of healthy old age. Is not the usual reality otherwise?

ANSWER:
You are right. But that which is average is not necessarily that which is normal. Things are getting worse in this respect, despite our conquest of infectious diseases. For example, during the last century the average period of terminal illness was about 1 percent of the life span. But gradually that figure has increased as chronic diseases have become the rule for people living in the western civilization. Now a terminal illness can take up to 10 percent or more of a life span. But we repeat, this does not have to be the case for those who lead disciplined lives.

QUESTION:
Are you saying that the main causes of death today are a result of our bad habits?

ANSWER:
Undoubtedly that is the case. A recent book had, as its first line, this statement: "Suicide by life-style is the main cause of death in the USA." Heart disease, cancer, strokes, diabetes, osteoporosis, high blood pressure, diverticulosis, and about 30 other diseases, in the Western world, are mainly preventable. Furthermore, none of these diseases are common in rural Africa and other Third World countries where processed foods are not available.

QUESTION:
Isn't all this information a bit dour? Isn't the gospel supposed to be good, glad, happy tidings?

ANSWER:
The law paves the way for gospel. Sinful nature sometimes requires threats before it can appreciate promises. The gospel promises life more abundant but only to those who seek and cherish the truth. "You shall know the truth and the truth shall make you free" (Jn 8:32). This was used with reference to our spiritual state, but in principle it applies also to our physical. We would suggest that it is good, glad and merry tidings to know that you can avoid most illnesses most of the time. That's not nearly as good as the forgiveness of sins, but it is a good runner-up.

QUESTION:
Is it legitimate to invoke the Bible when talking on such a topic as preventive medicine?

ANSWER:
Indeed it is. Consider this marvelous statement from a well-known writer:

No one can appreciate so fully as a doctor the amazingly large percentage of human disease and suffering which is directly traceable to worry, fear, conflict, immorality, dissipation, and ignorance – to unwholesome thinking and unclean living. The sincere acceptance of the principles and teachings of Christ with respect to the life of mental peace and joy, the life of unselfish thought and clean living, would at once wipe out more than half the difficulties, diseases, and sorrows of the human race. In other words, more than one half of the present affliction of mankind could be prevented by the tremendous prophylactic power of actually living up to the personal and practical spirit of the real teachings of Christ.

The teachings of Jesus applied to our modern civilization – understandably applied, not merely nominally accepted – would so purify, uplift, and vitalize us that the race would immediately stand out as a new order of beings, possessing superior mental power and increased moral force. Irrespective of the future rewards of living, laying aside all discussion of future life, it would pay any man or woman to live the Christ-life just for the mental and moral rewards it affords here in this present world. Some day man may awake to the fact that the teachings of Christ are potent and powerful in preventing and curing disease. Some day our boasted scientific development, as regards mental and moral improvement, may indeed catch up with the teachings of this man of Galilee.

S. I. McMillen, M.D., None of These Diseases, pp. 64-65, citing Practice of Psychiatry, St. Louis, C. V. Mosby Co., 1953, p. 1008. Italics supplied.

I have in my library several books that stress the fact that the Bible endorses diagnostic and curative medicine and, therefore, the work of physicians. But all those books continue by saying that the Bible's main stress is on preventive medicine. Due to the fact that medical costs are now rising at a rate seven times higher than inflation, even government are recognizing the necessity for practicing preventive medicine. But without the motivation the gospel offers, success inevitably will be limited for all such endeavors. We recommend the article "Medicine," found in Vol. 3 of The Interpreter's Dictionary of the Bible. All the principles of psychosomatic medicine are plainly set forth in Holy Writ.

QUESTION:
I don't like all this talk about diet and health. I was raised in a church that made eating and drinking the gospel. Surely that is not an example to follow?

ANSWER:

You are right. That is no example to follow. But again we urge you not to throw out the baby with the bath water. It is just a fact of life that D E A T H is mainly EAT. The old platitudes that we are what we eat, and that what we eat and drink today walks and talks tomorrow are entirely correct. Approximately 50 percent of cancer and an even higher percentage of heart disease can be prevented by right eating habits. That has become crystal clear in researches of the last decade, and only ignorant people deny it.

For example, it was in 1983 that The Lancet brought out a new series of articles entitled "Nutrition: The Changing Scene." This was quite revolutionary. Most physicians have had very little training in nutrition and the old joke about a Harvard physician knowing as much about diet as his secretary, unless she has a weight problem, in which case she will know more, is appropriate. But that is changing now and medical journals are leading the way. Here is an interesting quotation from The Lancet of July 23, 1983, p. 202:

In 1982 the best selling book in the United Kingdom was a guide to high fiber diets based on whole meal cereals with ample vegetables and fruit. The sale of over a million copies in one year demonstrated the popular demand for dietary information. Yet the message of the book had been available for centuries. However, the new study of nutrition in this century, prompted by the discovery of vitamins, overlooked the importance of dietary fiber ... This orthodox opinion was jilted in 1969 by Burkitt, who pointed out that cancer and other diseases of the large intestine, common in the West, were rarely seen in tropical Africa. He suggested that high intakes of dietary fiber protected Africans against these western diseases. His interest had arisen from a study of the writings of Cleave, who has for many years advocated natural diets. Interest was further aroused in 1971 by a report that patients with diverticulitis of the colon, previously treated with bland, low fiber diets, improved greatly when given high fiber diets. Evidence was also presented that dietary fiber might reduce the risk of coronary heart disease, diabetes, and other common disorders in the West, as well as disorders of the large bowel.

In the same journal of April 2, the same year, on page 750, is a fascinating article which states that in our modern western society, dietary sodium has displaced proper potassium intake.

This very high dietary sodium and low potassium intake may have an important role in determining blood pressure levels within a community. High blood pressure is an important predisposing factor to the development of strokes, heart attacks, and renal failure, and is probably the most preventable cause of death in the west. (p. 750)

Vegetarians have a higher potassium intake, may have a lower blood pressure, and might be expected to have a longer life expectancy than nonvegetarians ... Greater consumption of fresh fruit, vegetables, and cereals (i.e., making the diet more "natural") is unlikely to be harmful and may carry other benefits from the higher fiber and lower saturated fat content. (p. 751)

Again we quote The Lancet, February 5, 1983, p. 282:

Sugar is the principal cause of the most common disease in industrialized countries, dental caries ... in decreasing order of cariogenicity, are sucrose, glucose, and fructose; brown sugars are as cariogenic as white. (p. 282)

The Lancet not only contains special articles but also letters considered worth printing from doctors in Britain. The letters in recent years on the matter of nutrition are fascinating. Some single liners pack quite a wallop. Take this one: "dairy country is coronary country worldwide" The Lancet, April 9, 1983, p. 827. Or this one: "... Butter is by far the most heavily hydrogenated (saturated) of all fats." (Ibid.) Or some may prefer this statement: "Consumption of fruit and vegetables may protect against death from cerebrovascular disease (CBD), possibly through vitamin C" The Lancet, September 24, 1983, p. 742.

The following quotation sounds like an old-fashioned fundamentalist polemic:

As the number of smokers dwindles in the upper social classes and the message passes successfully down the social strata, so too may the messages about nutrition and excess weight. It will take a long time to struggle with any degree of success with the food manufacturers. It is only to be hoped that they do not follow the example of the tobacco companies and move their pitch to the Third World. The Lancet, January 22, 1983, p. 177

Diabetes sufferers in this country run into millions and the number is increasing. Mature-age-onset diabetes is chiefly the result, not of heredity, but of diet. In The Lancet journal of April 2, 1983, p. 741, the journal made the point that there was a new approach now to the treatment of diabetes, an approach mainly based on a diet of increased complex carbohydrates, that is, whole grains and other unrefined vegetarian foods.

We offer one final note from The Lancet, out of a multitude that could be used:

Controlling the diseases of affluence – coronary heart disease, cerebrovascular disease, bowel cancer, dental caries, obesity, diabetes – requires more than treatment of disorders already clinically apparent. A preventive strategy, improving the pattern of food intake, is not only essential, it's also feasible and effective. Coping with degenerative diseases demands a new approach to nutrition ... Disorders with a dietary basis today are chronic diseases which develop from an excess intake or an inappropriate ratio of some nutrients ... For the first time in the UK, the working party proposes specific targets for reducing intakes of those components in the national diet implicated in disease – fat, sugar, and salt. Intake of dietary fiber should increase through eating more bread, potatoes, fresh fruit, and vegetables.

The Lancet, December 10, 1983, p. 1353

QUESTION:
All this sounds to me like a new legalism. Aren't you cutting off the branch of grace on which we all rest?

**ANSWER:**

Not at all. Consider the words of the apostle of grace who set forth righteousness by faith more clearly than any other Bible writer:

> Whether therefore ye eat, or drink, or whatsoever ye do, do all to the glory of God. (1 Cor 10:31)

> Having therefore these promises, dearly beloved, let us cleanse ourselves from all filthiness of the flesh and spirit, perfecting holiness in the fear of God. (2 Cor 7:1)

> I beseech you therefore, brethren, by the mercies of God, that ye present your bodies a living sacrifice, holy, acceptable unto God, which is your reasonable service. (Rom 12:1)

> Know ye not that they which run in a race run all, but one receiveth the prize? So run, that ye may obtain. And every man that striveth for the mastery is temperate in all things. Now they do it to obtain a corruptible crown; but we an incorruptible. I therefore so run, not as uncertainly; so fight I, not as one that beateth the air: But I keep under my body, and bring it into subjection: lest that by any means, when I have preached to others, I myself should be a castaway. (1 Cor 9:24-27)

Of course, any legalism should be shunned. But there's a difference between legal and legalistic, just as there is between rational and rationalistic. A marriage should be legal but it should not be legalistic. And a life should be in harmony with law, both natural and revealed, but it should not be legalistic. Legalism is that endeavor to win the approval of God by a set course of human activity. It is certainly not legalism to wish to live to God's glory in response to his so great salvation. Neither are we suggesting in any such articles as this, that anybody should mark out a precise line in diet or other aspects of life-style for all to comply with. Circumstances differ, environments differ, and so do stomachs. It is still true that what is one man's meat may be another man's poison. Some people cannot digest whole grains, for example, and they are in better health if they use a variety of animal products, including meat. However, that is certainly not the case for the majority. The New Testament way of life is a life governed by great principles and not by minute regulations. But having said that, it must also be said that some of us benefit when we set for ourselves certain specific rules that protect us from our temperamental proclivities. Great harm is done when one tries to enforce such rules upon other people. Considering our own life-styles will give us abundant work to do. A system that demands of its adherents, a meticulous compliance with minute regulations is not a Christian system. It's also true that any group which advocates the idea that God is quite unconcerned with what we do with these bodies of ours and the appetites he has given us is likewise totally unChristian.

**QUESTION:**

You have had much to say about OTC and prescription drugs. How widespread is the use of illicit drugs?

**ANSWER:**

Nobody really knows, though there are many estimates. Take this one from Time of March 17, 1986:

> Federal experts estimate that between 10% and 23% of all U.S. workers use dangerous drugs on the job. Other research indicates that people who take drugs regularly, some 25% of the population according to Government calculations, are likely to use them at work or at least sometimes be on a high when they arrive at the workplace. In a 1985 study conducted by the 800-COCAINe counselors, 75% of those calling the hot line reported that they sometimes took coke while on the job, and 69% said they regularly worked under the influence of cocaine. One-fourth said they used cocaine at work every day. (p. 53)

There is a club for pilots who are on cocaine called Birds of a Feather Club. If the problem exists even among such responsible workers as pilots whose habits aid or endanger many others, it is certainly widespread across the whole spectrum of employment.

Over the last decade or so more than fifty train accidents have been attributed to drug or alcohol-impaired workers. More than $34 million worth of property was destroyed in these accidents, and what is much worse, over forty people were killed as well as scores injured. Those who think marijuana is harmless should recall that in 1979 a Conrail employee, high on that recreational drug, missed a stop signal while at the controls of a locomotive. His mistake alone cost half a million dollars and took lives.

While alluding to marijuana it should be said that, despite extensive whitewashing of this relatively mild drug, the long-term results may not be at all mild. Increasing evidence shows that large amounts of marijuana cause genetic damage in animals and are certainly productive of a severe loss of motivation in humans. So, while more subtle in action than most drugs, the facts indicate that lung damage, chromosome abnormalities and long-term mental changes are part of the price paid for its use.

The worst elements of drug use are the consequent addiction and, in many cases, crime to support the habit. The violent and nonviolent criminal activity triggered by drug sellers and drug users is no small proportion of the whole spectrum of crime. Cocaine alone is responsible for an immense illegal industry and simultaneously causes many deaths.

Legal drugs are no less hazardous. We are just less aware of their dangers because of their legality. Let it never be forgotten that the main drugs used in the USA are alcohol, nicotine, and caffeine, and each of these is linked to health problems. If people ate a proper diet, the appetite for drugs would be less, but even more significant is the spiritual vacuum in most moderns. For many, drugs are an escape from boredom and meaninglessness. Only the gospel is big enough to crowd out the host of false gods embraced by the lost.

**QUESTION:**
Is mental attitude really that important in provoking physical disease?

**ANSWER:**

Up to 80 percent of serious physical illnesses seem to develop at a time when the sufferer feels helpless or hopeless. The death rate for widows and widowers is ten times higher in the first year of bereavement than it is for others of the same age. Similarly, in the year following divorce, the parties concerned have ten times the incidence of disease that married people have.

**QUESTION:**

What is the health condition of the average middle-aged man in the USA?

**ANSWER:**

When Thomas K. Cureton wrote his well-known book *Physical Fitness and Dynamic Health*, he asserted that "the average middle-aged man in this country is close to death. He is only one emotional shock or one sudden exertion away from a serious heart attack – this nation's leading cause of death" (p. 15).

**QUESTION:**

What are the best antidotes to stress?

**ANSWER:**

Physical exercise and religious faith. Exercise is nature's protection against the "burn-out" induced by emotional and nervous stress. When we are anxious and worried, our muscles tense, but a person physically relaxed is also mentally at rest. The important point to keep in mind is that only physical activity regularly pursued brings about adequate muscle relaxation. The person who never exercises is far more liable to sustained muscular tension from circumstances that are stressful.

The second factor of religious faith has no substitute. Experience is not what happens to us but what we do with what happens to us. It is how we interpret life's experiences that has the casting vote as to their impact upon us, unless it is intense physical trauma as in a car accident. Those who believe that God is in charge of the universe, and that nothing happens to the believer but by divine permission and for his or her ultimate good – that person has the key to interpreting life's changes. God never originates evil, but belief in divine sovereignty carries with it the conviction that God is the great chessman who ultimately wins whatever the moves of opponents. The Christian has the assurance that he or she will win the war despite the appearance of losing battles. See our two books, *Coping Successfully with Stress and Distress* and *How to Survive Personal Tragedy*, for more on these topics.

**QUESTION:**

Is radon a real danger?

**ANSWER:**

Radon in American homes causes 10,000-20,000 or more deaths from lung cancer annually. The gas is colorless, odorless, tasteless and radioactive. It comes from soil uranium and seeps through the foundations and cracks of buildings. The danger from radon only exists in enclosed areas such as mines or homes. In climates where a good circulation of fresh air is permitted in homes through open windows such problems do not exist. In energy-conscious environments where homes are sealed, it may sometimes be necessary to put an exhaust fan in the basement as well as to close up any cracks through which the gas is seeping.

**QUESTION:**

Do infants and children suffer from passive smoking?

**ANSWER:**

They certainly do. Babies are especially at risk. Studies have shown that they have a greater incidence of bronchitis and similar disorders if one or both parents smoke. Particularly, but not solely, if the mother smokes, a child's lung capacity may be reduced and the way prepared for chronic lung disease. The greatest danger, of course, is that parental practice sets an example and paves the way for children to follow this particular vice.

**QUESTION:**

What was the Alameda County study?

**ANSWER:**

It was one of the most significant instances of medical research done this century. Its implications are far-reaching and of considerable practical importance to every man, woman, and child. All would profit by reading the summary of the research and its meaning found in the publication of the Oxford University Press entitled *Health and Ways of Living*, by Lisa F. Berkman and Lester Breslow. An abridgement of the thesis is found in an article which appeared in *Preventive Medicine*, 9, 469-483 (1980), "Persistence of Health Habits and Their Relationship to Mortality."

Dr. Breslow, dean of the School of Public Health at UCLA, studied 7,000 adult residents of Alameda County, part of the San Francisco Oakland metropolitan area. His concern, and that of his fellow researchers, was the health habits of these Americans. At the conclusion of the project, the world was told that eleven extra years could be added to the average person's life by seven simple health habits. We list them:

Don't smoke. Use little or no alcohol. Begin the day with an adequate breakfast. Don't eat between meals. Sleep seven to eight hours each night. Exercise frequently. Maintain ideal weight.
According to Dr. Breslow, for anyone to regularly violate any of these rules would lessen their survival probability after 9 years by 40 percent. After 9 years, a smoker's risk of death increased by approximately 70 percent and that of a heavy drinker by about 40 percent. Just to eat regularly between meals could mean an added risk of death of 20 percent.

Here is an approach to good health which is simple and which saves not only life but money, and avoids misery and pain to a great degree. We recommend it to all. The Oxford University publication mentioned above is written simply and can be read with profit by any layperson. Yet, it is also thoroughly documented, and it is hoped every doctor will study it closely.

**QUESTION:**
What can one do when overwork is a constant threat to one's health?

**ANSWER:**
First, be assured that God does not lay upon any of his children duties that will threaten their health. When Moses was in danger of taking his own life by too much toil, God sent him counsel through Jethro. "The thing that thou dost is not good; thou shalt surely wear away" (Ex 18:17-18).

Second, and we are but saying the same thing in another way: remember that when two duties clash, one ceases to be a duty. Third, learn to relegate, delegate, and eliminate. Relegate some duties to another time when life is not so crowded. Delegate some duties to other people who are not so loaded. Eliminate some things that are not really necessary.

Overwork is the devil's temptation for all whom he cannot tempt to be lazy. It is a sin, and should be opposed for the following reasons:

1. It suggests God is a hard taskmaster instead of a loving heavenly Father.
2. It lessens one's spiritual resiliency, and thus prevents or at least hampers the bearing of an uplifting testimony for Christ.
3. It dulls one's creativity until one tends to mistake quantity of output for quality of work.
4. It paves the way for illness and permanent physical infirmities.
5. It makes one touchy and harsh in family relationships.
6. It reduces one's time of effective service for the Lord.
7. It sets a bad example for younger Christians as to how one should live.
8. Inadvertently it teaches righteousness by works, a subtle legalism, instead of righteousness by faith alone, the glorious gospel of Christ.

The one who compiled this list confesses with chagrin that he has been slower than any snail in learning the lessons he hereby advocates. Destructive tendencies like legalism, as Luther said, are as an oil in the bones – always there. But prioritizing (the 80/20 principle) is the "name of the game."

**QUESTION:**
If a person exercises a great deal, will this be a safeguard against heart disease?

**ANSWER:**
Exercise on its own is not enough. Observe the following comments on the matter made after an extensive experiment with runners of various categories:

The findings suggest that daily, vigorous physical activity for many years does not protect individuals against hypertension or excess body fat, or guarantee low serum cholesterol or high HDL cholesterol values if they consume the usual American diet. Our experience over the past 13 years has been that diet plays a more important role in the control of blood pressure, percent body fat, and blood lipids than daily vigorous endurance exercise.

Harold Ehrlich, M.D., "Distance Runners as Models of Optimal Health," The Physician and Sport's Medicine, Vol 9, No 1, January 1981, p. 68.

Studies in Finland showed that men who were very active physically, on a daily scale, often had dangerous cholesterol levels. This fact of the inability of exercise to fully counter the influence of bad diet was further exemplified in the death of Jim Fixx whose cholesterol levels were high.

It cannot be emphasized too much that God has joined together right diet and adequate exercise. No person should depend upon either one alone.

**QUESTION:**
You stress that there is a balance in the universe reflected in the inviolability of law which the individual must heed to be healthy. It does not seem to me that the average person senses this. Are we not free to do as we please, and often with considerable success?

**ANSWER:**
Long ago Christ declared himself to be "the Way" and early Christians were known as the people of the Way. These titles are not inappropriate. Today, twentieth-century scientists give much attention to ecology, which is the study of the mutual interaction between all living things and their environment. When we speak of an ecosystem, we are referring to the systematic, orderly combination of living things mutually interacting with a shared environment. There are innumerable
ecosystems which also interrelate with each other and which defy separation. The astronomer, Harlow Shapley, declared that “We are brothers of the boulders” and “cousins of the clouds.” Francis Thompson, English poet, wrote:

All things by immortal power,
Near or far,
Hiddenly
To each other linked are,
That thou canst not stir a flower,
Without troubling of a star.
– The Mistress of Vision

We are free indeed but not so free as to escape the violation of natural law. Because of this health factor of relationships and the necessity of preserving harmony within these relationships, we have included in this work several chapters illustrating the principles of psychosomatic medicine which is based on the fact of the intermeshing of body, mind, and spirit.

QUESTION:
My son tells me that marijuana is perfectly innocuous. Is this so?

ANSWER:
Marijuana is more mild than most drugs but, nevertheless, the smoking of a single joint does as much harm to the lungs as the smoking of sixteen cigarettes. In addition to ultimate physical damage, the drug saps motivation and mental effort. The grand cure for all such addictions is the joy and adventure of Christian experience. Many take drugs just because they are plain bored. No one really trying to live the Christian life will ever be bored.

QUESTION:
I don't feel well and my doctor doesn't know what's wrong with me. What can I do?

ANSWER:
If thorough medical examination does not reveal the cause or cure of your problem, the golden rule is to do everything you know to be right as regards life-style in the hope that nature herself will ultimately rectify things. But remember that many problems with physical symptoms are triggered by the mind in trauma. Unless you are happy and at ease within yourself, the body's natural processes are working with the brakes on. So apply Matthew 6:33 and obey physical law. Meanwhile, become absorbed in helping others as much as possible, as a healthy alternative to preoccupation with one's own difficulties. Usually when we remove the cruel pressures of unwise habits, the native resiliency of health will reassert itself, but be sure to include wrong methods of thinking on your list of unwise habits. Healthy people cherish faith, hope, and love. Unhealthy people too often entertain the wrong emotions, including doubt, fear, hatred, jealousy, discontent, etc. Right this moment try counting your present blessings. Whatever you have lost, ignore, and concentrate on what remains. Remember: “Yard by yard, life is hard; but inch by inch, it’s a cinch.”

QUESTION:
It seems to me that too much preoccupation with health could breed poor health. Is not that the case?

ANSWER:
Certainly. And it is similarly true that too little attention to health can have the same or worse result. Every sane person needs to do enough studying to make decisions as to the best habits of life. Some such study may need to be renewed regularly to sustain motivation. But never should this degenerate into a constant listening for “a knock in the motor.” One can be aware that the clustered set of classical symptoms of weariness, insomnia, indigestion, irritability, headache, depression, etc. signify that there is real need for changes of life-style. But none of these on their own need be significant at all, and certainly should never absorb our whole attention.

We are imperfect beings in an imperfect environment, and the body is ever in a process of adjustment – a striving for homeostasis. Many of the indications of this process are manifest as symptoms but symptoms which usually are passing and therefore insignificant. Most small problems should be ignored except for the classic signs of cancer and heart disease. The average person experiences at least one symptom every three days which disappears within another three days or less. Regard all such as manifestations, not of disease, but of the process of homeostasis. Be preoccupied with the major duties of life and health, and most of the minor things will take care of themselves.

QUESTION:
I am no athlete by nature. How can I ever develop exercise patterns of activity?

ANSWER:
Exercise is not just for athletes. It is for everyone. And everyone can make great improvements on what they are now. It's not necessary that we should become athletes, but it is necessary that we should become healthy.

QUESTION:
But I get tired out if I only jog for a minute. Isn't it useless for people like me to try to learn to exercise?

ANSWER:
No. Your attitude is normal and typical of those who have not yet developed exercise patterns. But you will be surprised how quickly your endurance increases as you gradually improve your physical activities. Begin in a small way and work on from
Begin with a five-minute walk, then go to ten, then to fifteen, then to twenty, and on, until you are walking for an hour each day.

**QUESTION:**
I have heard that exercising can be dangerous, and some people drop dead while they are doing it. Is this so?

**ANSWER:**
Exercising is not nearly as dangerous as not exercising. Most heart attacks do not take place during exercise but during sedentary activities or sleep. There is no danger whatever in exercise provided the vigor of it is only gradually increased, beginning with low intensities, and then over the weeks and months developing into higher ones, provided atherosclerosis does not already exist in dangerous proportions. (That matter is best resolved by considering the nature of your diet in recent decades.)

**QUESTION:**
I have heard of such a thing as athlete's heart. Isn't that dangerous?

**ANSWER:**
It's a myth. The athlete's heart in reality is usually a very healthy one provided his diet is good.

**QUESTION:**
How can I find time to exercise when I already have too many things to do?

**ANSWER:**
Those who don't take time to exercise are forced ultimately to take time to be sick. What matters in life is quality time rather than quantity time. And quality time is impossible unless you are physically vigorous. That is to say, the majority of one's hours can only be quality time if one is in good physical condition.

**QUESTION:**
But I don't like jogging. It would bore me to death.

**ANSWER:**
You don't have to jog unless you can come to like it. You can swim, cycle, or engage in any physical activity that you enjoy doing, provided it is an activity which keeps the muscles working rhythmically and your lungs breathing deeply for at least fifteen to twenty minutes a day, and preferably longer.

**QUESTION:**
But I'm over fifty years of age and I've never exercised. Isn't it too late for me now?

**ANSWER:**
Certainly it is not. Even people in their eighties or nineties (not that many sedentary people ever live to eighty or ninety) find their health drastically improved when they begin an exercise program.

**QUESTION:**
Isn't it highly dangerous to act as your own doctor?

**ANSWER:**
It can indeed be so. Serious symptoms call for the swift interposition of a skilled doctor. Our protest is against the needless and causeless running to physicians at the occurrence of any slight symptom, with the result that the physician feels obliged to prescribe a drug.

**QUESTION:**
I don't have the time or the education to study into matters of medicine. How can I survive?

**ANSWER:**
The principles of health are few and can be mastered by people of little or no education. All the clues to the matter are found in the opening chapters of the Bible. If we would avail ourselves of unpolluted air whenever possible, unpolluted water, adequate but not excessive sunshine, unrefined, unprocessed foods prepared in as simple a way as possible, abundant physical activity, adequate rest, and trust in God, we would cut off the likelihood of 95 percent of diseases.

**QUESTION:**
What do you really mean by preventive medicine?

**ANSWER:**
I mean the practice of good health habits. I mean the avoidance of all known threats to health wherever possible. I mean chiefly right thinking, right eating, right exercising.

**QUESTION:**
Is the link between cause and effect in disease as strong as you suggest? Please give some examples.

**ANSWER:**
As regards AIDS, how safe is the use of condoms?

ANSWER:

We quote from The New England Journal of Medicine of May 21, 1987, p. 1340:
... It has recently been shown that condoms failed to prevent HIV transmission in three of eighteen couples, suggesting that the rate of condom failure with HIV may be as high as 17% ... It is clear that the use of condoms will not eliminate the risk of transmission and must be viewed as a secondary strategy.

**QUESTION:**
Is it now generally accepted that many, if not most, of common diseases can be prevented?

**ANSWER:**
An excellent volume published in London, in 1984, entitled *Epidemiology of Common Diseases*, by H. Peach and R. F. Heller, asserts that the following diseases are sufficiently understood, as regards etiology, as to be capable of prevention:

- Legionnaires’ Disease
- sexually transmitted diseases
- carcinoma of the lung
- malignant melanoma of the skin
- rickets and osteomalacia
- alcoholism
- rheumatic heart disease
- ischaemic heart disease
- stroke
- pulmonary embolism and deep vein thrombosis
- chronic obstructive airways disease
- occupational lung disease
- dental caries
- sclerosis of the liver
- road traffic accidents
- adverse reactions to drugs

It should be observed that the reference to sexually transmitted diseases also includes AIDS. In almost all cases, AIDS could be avoided by monogamy, unless one's partner used drugs intravenously.

**QUESTION:**
When need I see a doctor?

**ANSWER:**
Obviously it is better to be embarrassed or even impoverished than to risk dying prematurely. While Stanford Professor Robin warns us that there is more to lose than to gain by going to a physician at times of uncertainty, we feel his caution should also be taken with caution. Yet since the average person feels some sort of symptom at least once every three days, and remembering that 90 percent of diseases are self-limiting, and that only 2 percent of those who go to see physicians are hospitalized, it is obvious that the first impulse to rush to the doctor's office should not always be heeded.

George Teeling-Smith, director of the Office of Health Economics in England, rightly said, “Some people go to the doctor much too readily for quite trivial disorders, while others grin and bear it much too long.” What factors then should help us to make the wisest decision?

Emergency conditions for the most part shout so loudly that there need be no disputing the necessity of setting off posthaste to your physician, or anybody else's if you can't find your own. Keep in mind that the greatest killer, CHD, takes its chief toll during the first hour of a heart attack. Such symptoms as heavy pressure in the center of the chest for more than two minutes should precipitate one to the nearest emergency center. Note in this instance you should NOT go to your own doctor. You need immediate help.

Lewis Miller in his fine book *The Life You Save* rightly advises readers to see a doctor if they have observed any recent alarming or persistent change in health. Warning symptoms include:

- Severe shortness of breath after light work
- Unexplained loss of over ten pounds
- Cough of several weeks' duration
- Lump or discoloration of skin, not a bruise
- Unexplained constant fatigue
- Frequent headaches
- Diarrhea or constipation of about one week's duration
- Rash or itch of one or more weeks’ duration
Feeling of dizziness
Fairly frequent backaches (p. 74)

In contrast, most ailments call, not for a physician, but for patience, temperance, and perhaps occasional drugstore remedies. In such cases, the only treatment the physician would prescribe is similar to what you would yourself elect such as aspirin, bed-rest, cough syrup, liniment, etc.

Lewis’ book has a very helpful chart of symptoms, causes, and comments on pages 75-81 which alone makes the price of the book worthwhile. In this chart he suggests the following make a visit to the physician advisable: Belching, plus abdominal pain; belching associated with a fecal odor; excessive drinking of liquids and urinary symptoms; persistent loss of appetite or nausea and vomiting that persists; dizziness; persistent abdominal pain particularly when linked with other symptoms; severe or persistent chest pain as indicated above; expanding, hard, bleeding, sore lumps; enduring rash; persistent shortness of breath or coughing; continuous suicidal impulses, etc.

As for most other symptoms, they point either to a health problem that time will cure, or one that can't be cured at all, even by the best of medical help.

**QUESTION:**
Is it true that one can predict possible future diseases by examining existing habit patterns?

**ANSWER:**
One can make predictions that will be accurate as regards statistical averages. For example, any diet with an excessive intake of calories, fat, cholesterol, salt, sugar, vitamins, can result in obesity, hyperlipoproteinemia diabetes, hypertension, heart attack, stroke, uremia. Second, if the diet is deficient in protein, minerals, vitamins or fiber, the result is likely to be cirrhosis of the liver, kwashiorkor, osteomalacia, rickets, osteoporosis, diseases of the intestine, such as cancer, diverticulosis, functional disorders, mental disorders, skin diseases. A sedentary life usually results in obesity, heart attack, diabetes, low-level physical fitness and lack of vitality. As for a heavy smoker, the results may be cancer of the lung, mouth, lips, larynx; or emphysema and bronchitis, or cardiovascular diseases, etc. The free use of alcohol and other drugs can lead to cirrhosis, heart disease, accident proneness, mental deterioration, anxiety, depression, suicide, homicide. Whether our faulty attitudes or reactions to life's situations because of an inadequate philosophy, results can be anxiety, depression, suicide, psychosomatic illnesses, unhappiness, pessimism, cynicism, and lack of energy and fatigue.

**QUESTION:**
Is it true that in this age of the AIDS epidemic, people are beginning to recognize that sexual immorality is not only wrong, but it is dangerous?

**ANSWER:**
For the first time in decades this is being recognized by unbelievers as well as believers. Dr. Walter R. Doddle, of the CBC said, "The message goes out for everybody that the healthy sexual style is the single partner." The same message is being echoed in the popular magazines of the day, and in more serious reports written by government officials and others. For all thinking people, the sexual revolution is over and the one-night stand is unthinkable. Soon, divorces will begin to dwindle and monogamy will become popular, though not always for the right reason. In this country, homosexuals, bisexuals and intravenous drug users constitute the high-risk groups, but many see increasing risks for heterosexuals.

**QUESTION:**
Is it true that sexually transmitted diseases have greatly increased in numbers and varieties in recent years?

**ANSWER:**
It is undeniably so. Some years back these diseases were known as venereal diseases and numbered only five. But today there is a vast array of bacterial, fungal, viral, parasitic, chlamydial, spirochetal, neoplastic, and even traumatic disorders. Anyone surveying the scene must conclude that the sexual behavior in recent decades has broken through all boundaries, and that the present crop of diseases is nature's angry response. This includes the contemporary epidemic of AIDS which, if unchecked, could prove more dangerous to the world than the nuclear threat.

**QUESTION:**
Who should be tested for AIDS?

**ANSWER:**
Anyone who has indulged in high-risk behavior in the last ten or twenty years at least has a moral obligation to find out if he or she is infected. This not only includes homosexual and bisexual men, drug abusers, but all who have had a multiplicity of partners, or partners now of such people. Hemophiliacs and people who have had multiple blood transfusions between 1978 and the spring of 1985 should also be tested. The major reason for this testing is that those with a conscience might realize that henceforth their sexual behavior must be drastically curtailed, lest they infect others with death.

**QUESTION:**
As of May 1987, the recorded number of AIDS cases was approximately 35,000. Can this figure be relied upon or is the actual number much larger?

**ANSWER:**
The actual number is considerably larger, and probably in the future when AIDS by definition is expanded to include dementia emaciation, then there will be at least 10-15 percent added to the statistics. Hitherto, those with dementia emaciation have
been classified ARC cases rather than AIDS cases. You should also keep in mind that there are probably at least a hundred
people with the virus for everyone who has a clinically evident case of AIDS. Thus, it is now universally recognized that the
number of people with the virus in New York City alone is between ½ and 1 million, nearing the proportion of one in ten of the
population. If the increase continues at the same rate, within three years or so the majority of New York's inhabitants would
have the virus. But this is not likely.
CHAPTER 57
Questions and Answers on Medical Practices

The medical establishment has become a major threat to health. The disabling impact of professional control over medicine has reached the proportions of an epidemic. Iatrogenesis, the name for this new epidemic, comes from iatros, the Greek word for 'physician', and genesis, meaning 'origin.' Discussion of the disease of medical progress has moved up on the agendas of medical conferences, researchers concentrate on the sick-making powers of diagnosis and therapy, and reports on paradoxical damage caused by cures for sickness take up increasing space in medical dope-sheets. The health professions are on the brink of an unprecedented housecleaning campaign.

Ivan Illich, Limits to Medicine, p. 11.

* * * *

Modern medicine is only one approach to health – a wholly disease-oriented approach. Its paradigm of healing assumes that highly refined techniques and profound interventions into the body can produce health by eliminating the symptoms of disease. This has led to the neglect of population medicine because there is no paying consumer; the neglect of social and environmental conditions, because physicians are only trained to intervene at the individual level; the neglect of a blizzard of phenomena about the human being, because it does not fit the paradigm; and finally neglect of the role of the individual in achieving health, because if health is a commodity it must be delivered to a manipulable public.

Rick J. Carlson, The End of Medicine, pp. 210-211.

* * * *

QUESTION:
You have spoken much about the placebo. It seems to me that I have not heard a great deal about placebos in popular health literature. Do the doctors discuss it among themselves?

ANSWER:
Yes, indeed. Doctors are much more likely to spill out the contents of their hearts and minds when talking to each other than when talking to laymen. But in recent years researchers from among nonmedicalists are also speaking out. See the article "The Lie That Heals: The Ethics of Giving Placebos," by Dr. Howard Brody, in Annals of Internal Medicine, July, 1982, p. 112ff. And particularly read what Norman Cousins has written on the topic in The Anatomy of an Illness, and Brenden McGann, in Behavior, Health and Lifestyle.

QUESTION:
Is it really true that the environment for professionals in medicine is becoming increasingly more difficult? Do the medical journals bear witness to this?

ANSWER:

...harsh, bureaucratic, governmental censorship of daily medical practice. The censorship being imposed upon the medical profession in the United States today exceeds anything ever placed upon any other professional trade, except in war time. What we see now with DRGS, predmission screenings, PSROS, and the quality assurance is the imposition of conformity and restriction that has been witnessed only in the governments of autocratic tyrants or in harsh Communist regimes.

The writer declares that the rope being placed around the doctor's neck is not a string of pearls but a hangman's noose. He suggests that the progress of medicine is being retarded or halted altogether. Many, of course, would disagree with this viewpoint, but it is a representative one nonetheless.

QUESTION:
Is it correct that in the new health care systems the doctor-patient relationship is endangered?

ANSWER:
Many physicians believe that is the case. For example, in The New England Journal of Medicine, of April 16, 1987, Vol 316, No. 16, p. 1031, Dr. Harry J. Cohen says:

It has become obvious to many physicians that in some new health care systems they would no longer be their patients' advocates. They see the promulgation of the shift in advocacy to management and, in for-profit plans, to investors. Indeed, in plans in which the primary care physicians (also known as "gatekeepers") share in the money set aside for patient care but not spent, those physicians are tempted to become advocates for themselves.

As patients become aware of the shift of advocacy, and they will, the doctor-patient relationship will change.
Is there any way that our burgeoning health costs can be drastically reduced without damage to the health of our population?

ANSWER:

The U.S. Department of Commerce estimates that this year we will spend over $500 billion on health for the first time in our history. For years the increase in medical expenditure has been multiple times that of contemporary inflation.

Doctors Brook and Lohr assert in a recent *National Academy of Sciences* article that about one-third of our health-care dollars are wasted on inefficient or unnecessary services, including unnecessary lab tests and other diagnostic procedures, unnecessary surgery, and an extreme excess of hospital beds that cost billions a year to maintain. But the chief area where money could be saved in huge amounts is the area of preventive medicine. Every year we witness huge amounts spent on the diagnosis and treatment of diseases that need not be. For example, more than a third of a million deaths take place a year just from smoking. Add to that about another quarter of a million deaths each year from bad working conditions and exposures to air, water, and toxic waste pollution, and it becomes readily apparent that at least half of our $500 billion could be saved.

QUESTION:

I have heard that stroke-prevention bypass surgery is no longer considered effective. Is that the case?

ANSWER:

Recent studies have affirmed that extra cranial-intra-cranial bypass surgery is discredited and its surgeons who continue to offer the procedure are not ethical. Not all agree with this conclusion, but it is one worthy of continued follow-up. See *Internal Medicine News*, April 15-30, 1986, p. 1.

QUESTION:

Can you give me the name of a good general textbook on medicine that even a layman can use as a reference resource?

ANSWER:

Harrison's *Principles of Internal Medicine* has been described as containing "as much, if not more, scientific fact as any of us need for the rational practice of medicine." The first chapter, "Introduction to Clinical Medicine" is acknowledged as a classic worthy of reading and rereading by all professionals, and it will be of interest also to laymen.

QUESTION:

Is it true that the wide use of antibiotics has led to a great deal of resistance being developed in the microbial world resulting in the obsolescence of some antibiotics?

ANSWER:

Yes. To quote one writer:

> Almost always, the general pattern of antibiotic usage in the medical profession has led from initial success and enthusiasm to partial or complete failure and disaffection. As each new agent went to work on a susceptible population of bacteria, it appeared to be plagued by the emergence of resistant forms or the appearance of unanticipated side effects. In short, almost every "miracle" drug seemed to need replacement or backup with a new one to ensure continued efficacy.

*Germs That Won't Die*, by Marc Lappe, Ph.D., pp. 20-21.

Because of this problem an organism often becomes resistant to the usually employed antibiotics. The result is a perpetual cycle of "programmed obsolescence and escalating costs as each new drug is introduced, and resistance inevitably emerges." Thus, the medical world is ever hoping for the development of new drugs to meet this problem of resistance. What will happen when these hopes cease to bear fruition remains to be seen.

QUESTION:

In view of the continual about-face of medicine with reference to drugs, forms of surgery, and other therapeutic methods, can we really have any confidence in modern orthodox medicine?

ANSWER:

Medical science like all science is self-corrective. As Howard E. Gruber once wrote, "The power and the beauty of science do not rest upon infallibility, which it has not, but on corrigibility, without which it is nothing." Progress in medicine, as in every other field, and indeed in personal living, is like the income of the tide – progress on the whole.

QUESTION:

Is it true that the once-popular idea of an annual health examination has been superseded?

ANSWER:

About eight years ago the Canadian Task Force on the Periodic Health Examination recommended that the annual physical checkup be replaced by a lifetime program affecting life-style. A number of spokesmen of other countries have taken this same position.

QUESTION:

Are there signs that orthodox medicine is recognizing the necessity of emphasis on preventive medicine?

ANSWER:
Yes. Many articles in the journals tend now in this direction. The document "Physicians for the Twenty First Century" prepared for the Association of American Medical Colleges, by the panel on the General Professional Education of the Physician in College Preparation for Medicine, has this to say: "Medical students' general professional education should include an emphasis on the physician's responsibility to work with individual patients in communities to promote health and prevent disease..."

QUESTION:
Orthodox medicine seems always to have put its emphasis more on the disease a person has than the person who has the disease. Is this changing?

ANSWER:
It is changing for many thoughtful physicians. For example, we read the following in the *American Journal of Medicine*, October 1983, p. 555:

... Every disease consists of multiple diseases; in this sense, too, there are no diseases but only sick people. For this reason, the presently held concept of disease, i.e., that it is a distinct, recognizable entity with presumptively uniform causation and precise therapy, may be incorrect. Instead of disease, one should perhaps speak of a tissue reaction or group of reactions with different levels of causation and thus a diagnosis.

The same writer, Dr. W. Jeffrey Fessel, continues by saying:

In most circumstances, disease is not an inevitable outcome of a single event occurring at a point of time but generally a probabilistic result of many events, such impinging on the organism at separate times and each producing its own sequence of biologic reactions. The sum total of these events produces sufficient discomfort to the person to be recognized as illness ... All of life's events are interwoven, and even the most widely separated are held together by the thread of the warp or woof. *(Ibid.)*

QUESTION:
What percentage of hospital deaths are linked to hospital-acquired infections?

ANSWER:
Some researchers have suggested as much as one-third. This is probably excessive. According to the *American Journal of Medicine*, October 1983, p. 658:

The National Nosocomial Infections Study states that for all hospitals 0.9 percent of nosocomial infections are causally related to death and an additional 2.9 percent contribute to death.

Other researchers suggest a figure almost twice that.

QUESTION:
How accurate is hair analysis for nutritional assessment?

ANSWER:
Not very. There are too many pitfalls as well as a variety of results from different analysts. See the article on this topic in the *American Journal of Medicine*, September 1983, p. 489ff.

QUESTION:
Is it dangerous to take large amounts of L-thyroxine for thyroid problems?

ANSWER:
Self-administration of thyroid hormone can be very dangerous indeed. It should always be supervised by a health professional. Excessive amounts can cause death. Doses once administered by doctors considered appropriate, are now considered to be excessive. Here we have one of those delicate areas where insufficiency leads to incapacity but to err too much the other way can lead to fatality.

QUESTION:
It seems to me that decades ago doctors were more definite in their recommendations than they are today. Is this the case?

ANSWER:
Dr. Eric Reiss has written a splendid article on this topic entitled "In Quest of Certainty," found in the *American Journal of Medicine*, December 1984, p. 969ff. There he says:

Apparently in medical practice, uncertainty is overemphasized to the detriment of good patient care, whereas in medical education, students are misled by an unwarranted sense of certainty.

On the same page the writer says:

Medical students are major victims among those who seek certainty in an inherently uncertain activity. Science is now moving so fast that the most revered dogmas of a few years ago have been relegated to interesting history. Students are unprepared for the rapidity with which change is taking place. *(pp. 969-970)*

The author of this article gives splendid counsel to the professors who teach medical students. He says that in guiding younger colleagues through the chasm of uncertainty it is important that they (the students) understand that:
1. The half-lives of “facts” are decreasing all the time; 2. Not all presently accepted “facts” are worth knowing; 3. Critical judgment rather than memory is the important faculty that should be fostered; and, most important of all, 4. Whereas current knowledge is ephemeral and insecure, the process leading to new knowledge is well established... (p. 971)

QUESTION:
Is it too old-fashioned to suggest that a major interest of modern medicine should be the discovery of the basic laws of nature in order that life-style might be conformed to these, rather than looking for methods of conquering nature and eradicating results of our disobeying her?

ANSWER:
Francis Bacon said pretty much the same thing years ago when he wrote the essay "The Advancement of Learning." There he said that "Force maketh nature more violent in return. For we cannot command nature except by obeying her." It was Bacon who warned that education and knowledge without accompanying charity could be very dangerous indeed. He declared:

It is not the pleasure of curiosity ... nor the raising of the spirit, nor victory of wit, nor lucre of profession, nor ambition of honor or fame, nor inablement of business, that are the true ends of knowledge. Mere power and mere knowledge exalts human nature but do not bless it. We must gather from the whole store of things such as make most for the uses of life.

*The Advancement of Learning*

QUESTION:
It seems to me that hospitals sometimes add to illness and slow up the process of cure. Is that a way-out position to take?

ANSWER:
Not at all. The word nosocomial actually means just what you have said. In an article in the *American Journal of Medicine*, October 1984, entitled "The Kindly Stress of Hospitalization," we read:

By failing to meet the needs of the persons it claims to serve, certain aspects of the hospital environment may actually inhibit the curing process. (p. 596)

Not only does dangerous bacteria abound within hospital walls, but patients have little discretion over their schedule, or their nutrition, or their physical habits while institutionalized. Instead of being active participants in their own care, they are passive recipients. Furthermore, it is a very difficult task to get adequate rest in an institution where programming from the early morning until late at night rules. All of this needs changing.

QUESTION:
Is it true that the AIDS phenomenon has showed up significant flaws in our system of financing private and public medical care financing?

ANSWER:
Yes. Representative Henry A. Wasman, chairman of the House Energy and Commerce Subcommittee on Health and the Environment in a speech on March 28, 1987 declared:

AIDS has shown in harsh light the cracks and flaws and holes in the American health care system. AIDS has shown that our insurance system is unfair. If you lose your job – because of economics or because of illness – you lose your insurance. AIDS has shown that Medicaid is shallow and inadequate. You can qualify only if you're totally disabled and have less than $1,500 to your name. AIDS has shown that we can produce medical miracles for the rich and plain neglect for the poor. AZT [azidothymidine] is priced for kings and Medicaid is for people who have been made paupers. AIDS has shown that our best private hospitals are basically businesses – dumping patients without insurance. And AIDS has shown that our public hospitals are crowded, understaffed, underequipped, and bankrupt.

Other significant questions have been raised. Charles Krauthammer, columnist and psychiatrist wrote in the *Washington Post* of June 12, 1987 as follows:

AIDS is public health enemy No. 1, says President Reagan. It is on every front page, on every candidate's lips ... When politicians are unanimous on any issue, it is time to pause ... Why should the fight against AIDS be the exclusive beneficiary of a massive government effort? Because AIDS is fatal? Since 1981 AIDS has killed about 20,000 Americans. Heart disease kills 65,000 every month. Because AIDS strikes young people in the prime of their lives? Schizophrenia, which afflicts 1,650,000 Americans, is also a disease of young people. It destroys their minds. (Many of the wretched homeless are finishing long careers as schizophrenics.) Because AIDS is going to strike a lot of people in the future? The surgeon general estimates that by the end of 1991 a total of 270,000 AIDS cases will have occurred. This year alone there will be 965,000 new cancer cases. It is not good politics to come out against an AIDS cure, but it is worth asking the question: Why should AIDS be a privileged disease – federally protected, as it were – while other diseases, many of which cause suffering in many more Americans, are not?

QUESTION:
Have all physicians and dentists etc., been taking appropriate precautions in connection with AIDS?

ANSWER:
No. Habitual procedures are hard to change and dentists in particular have been slow to implement health counsels offered them by their own organizations. But this is changing. Note the comment by *The New England Journal of Medicine* of July 16, 1987, p. 181:
The organizations representing physicians, dentists, nurses, and allied health professionals that were not attending fully to the implications of AIDS before May 20 were compelled to do so then, because on that day the CDC announced that three health care workers had contracted the disease after being exposed to blood from infected patients. At the John Hopkins Hospital, for example, a former resident has sued the institution, claiming he was infected with the AIDS virus when he cut his finger on a tube of a patient's blood.

QUESTION:
Is there any alternative to shots and pills?

ANSWER:
For certain health problems the adhesive skin patch can now be used, particularly for high blood pressure, angina, osteoporosis, and PMS. Ultimately the patch will replace pills and shots for a large number of diseases.

QUESTION:
Are you suggesting that there is the beginning of a change of climate in matters of health and disease?

ANSWER:
This is certainly the case. More and more medical researchers are writing up their convictions and these convictions emphasize that at least 70 percent of our diseases are diseases of choice and that there is a potential 30-year difference between the life spans resulting from good habits or bad ones. One of the most important writers in this area is Thomas McKeown. His book, The Role of Medicine, is a classic which has never been refuted and never will be. We leave with you one quotation from that book which we heartily endorse, except we would wish to substitute "was created" where he has "evolved."

The requirements of health can be stated simply: Those who are fortunate enough to be born free of significant congenital disease or disability will remain well if three basic needs are met. They must be adequately fed; they must be protected from a wide range of hazards in the environment; they must not depart radically from the pattern of personal behavior in which man evolved – for example, by smoking, overeating, or sedentary living.

QUESTION:
When one stops to think about the advantage of turning off a faucet rather than cleaning up the torrent of water, how is it that preventive medicine has been so neglected?

ANSWER:
Because of sin we are all born fools. We have knowledge but not wisdom. Wisdom comes from the Most High and is not the natural inheritance or achievement of man. In our scientific age, knowledge in many areas is now doubling every few years, and yet this century has seen the slaughter of over 100 million people by a violence that is not only criminal but senseless. More people have been destroyed in this twentieth century by human government than in any past millennium. Yet, this is supposedly the most advanced era the world has ever known.

Kierkegaard said of the esteemed philosopher Hegel: "He explained everything in life except how to get through an ordinary day." Consider as well the fact that our universities teach how to make a living but not how to live. Reflect also that even men of genius, like Einstein, used tobacco to their own detriment and the great loss of others. For decades the movie business has pictured their heroes with white coffin nails dangling from their lips! Is not our display all tinsel? Have we not been a long time learning some very obvious things, and have we truly learned them yet?

In all other areas each generation stands upon the shoulders of all its predecessors, but not in the area of morality. In that crucial field we must each learn by pain unless we accept the Christian revelation. Health is a part of morality, because the only way of developing mind and spirit is through the body. An old adage says the health should be as sacredly guarded as the character. True indeed! But no one "misses the water till the well runs dry." If we really stopped to think of the obvious truth that this physical machine is the only one we will be given down here, would it not – should it not – make a difference to our whole life-style?

QUESTION:
Does the study of psychology and psychiatry have a bearing upon health?

ANSWER:
Yes, indeed. The laws of the mind are also the laws of God and ignorance or neglect of them is equally perilous. But the tomes of psychology are not always the best source of knowledge in this area. Despite the fact that the psychiatrist has not only his M.D., but the extra knowledge of his special training, psychiatry has not had a good track record as regards healing of the psyche. Many in this profession have found their work frustrating and unrewarding. Suicide is more common among them than among doctors in general. So, whether we look at the more humble venture of the typical psychologist or the advanced calling of the psychiatrist, while grateful for their insights, there is obviously much more to be gained elsewhere about the sickness of the mind and its healing. Thus, Carl Jung affirmed that almost all who had come to him really had as their root problem a deep spiritual need.

Dr. Robert Coles called by Time "the most influential living psychiatrist in the U.S." is a Christian. He became one by his study of people, particularly people of faith, including the famous six-year-old black girl, Ruby Bridges, who braved the antagonism of the whites in the South when she was the first black child to attend Frantz School. Coles has written 38 books and 900 articles, but he recommends as sources of knowledge, apart from mixing with people, the great literary works of recent centuries, including the works of Walker Percy, Tolstoy, Dostoyevski, Pascal, Merton, John of the Cross, Robert Frost,
Flannery O'Connor, Dickens, Orwell, George Eliot, Thomas A' Kempis, Kierkegaard, etc. For example, he declares: "A man like Tolstoy knew more psychology than the whole twentieth-century social science scene will ever know."

*Christianity Today*, in a splendid article by Philip Yancey, gives Coles' reply to the question: "What have you learned about human beings?" Here it is:

> Nothing I have discovered about the makeup of human beings contradicts in any way what I learn from the Hebrew prophets such as Isaiah, Jeremiah, and Amos, and from the Book of Ecclesiastes, and from Jesus and the lives of those he touched.

> Anything that I can say as a result of my research into human behavior is a mere footnote to those lives in the Old and New Testaments...


Does this not suggest that all the wisdom most of us need can be gleaned, even by the uneducated, from the Best of books, wisdom regarding the care of the human body, mind, and spirit?

**QUESTION:**

Is modern medicine going to continue in its present direction with increasing emphasis upon professionalization and technology?

**ANSWER:**

No way. Governments are waking up to the fact that medical expenses are growing at several times the rate of inflation. In this country, 11 percent of the gross national product is devoted to medical care, a tremendous increase in recent years. This trend has to stop or, as Dr. J. Bradshaw has pointed out, by the year 2000 all Americans will be part and parcel of the health-care system, i.e., all inhabitants of this country will be engaged in the medical treatment of the physical ills of their fellows. Already, health care is among the top businesses, and it now threatens to become a mammoth devourer of all else. Companies like General Motors are said to pay more to Blue Cross and Blue Shield than to U.S. Steel each year. Furthermore, the population is restless, wondering whether it is really receiving its money's worth. The chief cost of medical care is for chronic problems which cannot be cured. The really effective medical procedures, such as vaccination and antibiotics, etc., are usually quite inexpensive. It is chiefly the expensive ventures of medicine with high-level technology which are so costly and often nonproductive. Usually, the more involved the therapy, the less effective it is.

Most people mistakenly think that almost all medical care is at present being handled by health professionals. This is not the case. Seventy-five percent of all health care in this country is carried out by the ailing individuals themselves or their families. This is no more all bad, than professional care is all good. The trend will certainly increase. The Norman Cousins' approach, combining personal responsibility with professional medicine, inevitably will become the pattern for intelligent people in coming years. Sociologist, Lois Pratt, has pointed out that "the more numerous and vital the functions the family performs successfully for its members, the stronger is the family system; the fewer the important functions performed, the weaker the system." She continues:

> The family is a social unit with considerable potential for performing health care, since families are held legally responsible for sustaining their member's health, they maintain a physical plant which is suitable for health care practice, and the members live together in relationships of mutual care and support.

Then she draws the contrast:

> The emerging medical care system is based on specialization of work, centralization of activity in large complex units, bureaucratization of the work unit, control by management over work and personnel, corporate involvement in and exploitation of all aspects of the health market, and extension of profit-making to all sectors of health care.


**QUESTION:**

I understand that the germ theory, though generally accepted, is not regarded now as adequate for explaining the genesis of disease. Why not?

**ANSWER:**

There is an increasing stress on the immune system as the great barrier to disease. A medical aphorism runs: "It is not so important what disease a man has, as what man has the disease." Similarly, one could say that in many cases: "It is not so important what germs have invaded a human, as what is the state of that person's immune system."

It was in 1870 that Robert Koch proved that bacteria could cause illness. A hundred years later scientists are stressing both the strengths and the limitations of Koch's disease model. It is now generally recognized that disease is usually the result of complex, not simple, interactions among agent, host, and vector (animal or insect purveyor). The germ-theory causation is not always applicable to pathogenic bacteria, viruses, fungi, and parasites, and does not include the often important concepts of the asymptomatic carrier state (that is, someone carrying and even imparting the germs but who himself reveals no symptoms), the biologic spectrum of disease, the epidemiologic and immunologic elements of causation, multiple causation, the reactivation of latent agents, the prevention of disease by eliminating the supposed cause, the possibility that clinical syndromes may have different sequences of causation in different settings.

Most chronic diseases today are not the products of virulent bacteria but of our own oral vices such as smoking and heavy intake of animal fats or refined foods.
QUESTION:
How successful is most medical intervention in cases of chronic disease?

ANSWER:
Almost nil. See the *Time* 1976 essay by Dr. Knowles, former president of the Rockefeller Foundation. Chronic diseases can be prevented but rarely cured.

QUESTION:
Why don't the leaders of this country stress preventive medicine more?

ANSWER:
Ignorance is a key factor. Former President, Jimmy Carter, has spoken of his own transition from emphasis on curative medicine to preventive. "Prevention is both cheaper and simpler than cure, but we have stressed the latter and we have ignored, to an increasing degree, the former ... In effect, we've made the hospital the first line of defense instead of the last."

QUESTION:
For practical purposes, how complex is medical knowledge?

ANSWER:
The key word in your inquiry is "practical." Obviously what intelligent men and women take years to learn cannot be mastered by a layperson in a matter of weeks or months. On the other hand, and pertinent to your question, is the comment of Dr. Ashley Montagu who taught at Harvard and New York Universities, as well as Rutgers University, and wrote several well-known books including *Human Heredity*.

Many, perhaps most, problems that come to medical attention are quite simple and easily diagnosed ... the truth is that most conditions with which the physician is confronted require no knowledge that is beyond the grasp of any intelligent human.

QUESTION:
People seem to take for granted the necessity of using drugs for mild hypertension. Is there no official protest against this attitude?

ANSWER:
There is an increasing protest. *JAMA* of April 19, 1985, p. 2260, rightly said: "Our current policies raise many questions." For starters, consider the fact that millions have been labeled as mildly hypertensive who are not so at all. For a large percentage of people, the experience of having one's blood pressure taken in a doctor's office is traumatic and raises a normal blood pressure to one considered mildly hypertensive. Thus, there are probably millions being regularly drugged for a disease they don't have. It is an expensive error as the therapy can trigger many physical ills.

Second, the evidence is overwhelming that just losing weight can solve the problem for most mild hypertensives. Those who shift to a diet of natural, unrefined foods and who learn to exercise (even if only by a thirty-minute walk a day) can usually reduce their blood pressure significantly. Observe the warnings of the following statement from a conservative yet official source:

The long-term results of drug therapy over many decades remain unknown. Some studies raise questions about risks associated with drug therapy. The data from the Multiple Risk Factor Intervention Trial suggest that mild hypertensives with electrocardiographic abnormalities may have a higher mortality rate when treated with thiazide diuretics. Other recent work indicates that some antihypertensive drugs raise cholesterol levels or lower high-density lipoprotein levels so that the benefit of reduced blood pressure may be offset by an increased cardiovascular risk from lipid anomalies...


QUESTION:
What are some of the most important patient rights that people should know?

ANSWER:
Every potential patient should know that:

The American Hospital Association has prepared A Patient's Bill of Rights which, if you search for it, you may find on the wall of the hospital you enter. The patient should know in advance that he or she has rights established by legal precedent. Every hospital and every doctor has a responsibility to the patient.

This Bill of Rights includes some very obvious items such as "The patient has the right to considerate and respectful care."

"The patient has the right to obtain from his physician complete current information concerning his diagnosis, treatment, and prognosis in terms the patient can reasonably be expected to understand."

"The patient has the right to examine and receive an explanation of his bill, regardless of source of payment."

Other items may not be as obvious but they are just as legal:

"The patient has the right to receive from his physician information necessary to give informed consent prior to the start of any procedure and/or treatment."
"The patient has the right to refuse treatment to the extent permitted by law and to be informed of the medical consequences of his action.

"The patient has the right to expect reasonable continuity of care.

"The patient has the right to obtain information as to the existence of any professional relationships among individuals, by name, who are treating him.

"The patient has the right to be advised if the hospital proposes to engage in or perform human experimentation affecting his care or treatment. The patient has the right to refuse to participate in such research projects."

But there are some matters that need even greater emphasis than those found in the Bill of Rights even if there implied. For example:

A patient has the right to keep his illness secret from the family.

No family has the legal right to stop treatment of a competent, ill family member if the patient wants it continued.

A patient has the right to refuse even lifesaving treatment.

A patient can sue a doctor who treats him against his will.

Even if a patient can't pay, once admitted to a hospital, that institution has the obligation to either maintain treatment or transfer the patient to another hospital. Should a patient be discharged because he or she can't pay, the patient can sue the institution. And what is true of the institution is also true of the doctor who has begun treatment.

A patient can leave a hospital at any time. No institution for ordinary medical care has the right to prevent a patient's departure.

A patient has the right to refuse to be examined by anyone other than his doctor.

The patient should regard himself or herself as a consumer, not a passive recipient of whatever treatment is handed out. Barbara Huttmann, R.N., was undoubtedly correct when she wrote in *The Patient's Advocate*:

> Whether you call it assertive, aggressive, nasty, demanding, antsy, or picky, that's what you have to be in a hospital. ... While it would be nice to leave the hospital with a flock of new friends waving goodbye, put "new friends" at the bottom of your priority list and "improved health" at the top.

Remember, down here you are only issued one body. When it's through, as regards this world, you're through!

**QUESTION:** Is it true that some prescribed drugs dangerously interact with other medicines?

**ANSWER:**

Yes. Antihistamines if taken with tranquilizers can make you dangerously sleepy if you are driving. Valium and other drugs (especially aspirin) do not go well with alcohol. They are positively dangerous.

**QUESTION:** Is it necessary for someone with diastolic blood pressure less than 100 mm. Hg to be treated with drugs?

**ANSWER:**

An increasing number of researchers say No. See, for example, the *British Medical Journal* 293:433, 1986, for a study by R. Wilcox, who also believes that there is no evidence for treating patients with isolated systolic hypertension.

Millions with moderately elevated blood pressure are taking medication unnecessarily and at a very high cost — not so much financially as physically, professionally, family-wise, and socially. Most medications only treat symptoms and not the cause of the problem. Those with high blood pressure need to lose weight, exercise, and drastically change their diet. Having said that, it should also be said that extreme cases of elevated pressure may call for temporary drug therapy until the life-style changes accomplish their objective of lowering the crucial numbers.

**QUESTION:** Why does the church have to get in on the act as regards health? Can't we leave it to the professionals?

**ANSWER:**

Max Warren answered that a generation ago. Here are his words:

> The fundamental sicknesses of men have always been sicknesses of the spirit and the mind. Never, perhaps, was this more obviously so than today ... Only a healing which makes a man whole and integrates him with his fellows in a true community, living in a right relationship with God and with the good earth which God has given man, only such a healing is adequate to the imperative 'go heal.' For this reason the Church must not imagine that it can relegate the responsibilities of its healing mission to a representative company of physicians and nurses, surgeons and anesthetists, pathologists and dispensers...

*The Christian Imperative*, pp. 81-82.

**QUESTION:** Your emphasis that the individual usually has the casting vote in his health status seems to me exaggerated. Do medical specialists agree?
In the report by the Surgeon General in 1981 entitled "Health Promotion and Disease Prevention" appear these words:

You, the individual, can do more for your own health and well being than any doctor, any hospital, any drugs, any exotic medical devices.

The same emphasis is found throughout the well-documented study edited by Dr. John Knowles, former president of the Rockefeller Foundation, entitled Doing Better and Feeling Worse. See also the Consumer's Guide to Medical Care, Take Care of Yourself, written by Dr. Donald M. Vickery, and Dr. James F. Fries, third edition, 1986.

QUESTION:
Is it true that radiation is now used less freely than it used to be?

ANSWER:
In informed places, among informed people, this is true. X-ray therapy, conservatively used, has a valuable part to play, but it must be confessed that its indiscriminate use has cost many lives. A review panel at the National Cancer Institute recently concluded that there is no safe dosage of radiation. This does not mean that it must never be used, but that it should be used in full awareness of its dangers. Some researchers assure us that it has not been possible to demonstrate a survival advantage in breast cancer patients given radiotherapy. So-called advances are only a matter of earlier diagnosis which, according to some skeptics, benefit the medical establishment but not the patient. It has not yet been demonstrated that screening and local therapy will ultimately decrease breast cancer deaths.

QUESTION:
Are you challenging the germ theory?

ANSWER:
No. It is right in what it affirms, but wrong in what it seems to deny. Too often it ignores the part played in disease by other factors such as a depressed immune system. Any model of disease causation that relies exclusively on finding single agents as the necessary and sufficient causes of specific disease suffers from limitations.

QUESTION:
You refer to iatrogenic and nosocomial diseases which I understand to mean physician-induced and hospital-induced illnesses. Is this a growing area of concern?

ANSWER:
Very much so. Most doctors do not send the members of their own families for regular medical examinations, nor do they go themselves. The paradox is true that we should use hospitals but also avoid them. Even when correct treatment is used by a skilled and conscientious physician, harm sometimes results.

Today, high-technology treatment of disease has become epidemic, despite the fact that the more complicated the treatment, usually the lower the ratio of benefit. There is nothing wrong intrinsically with sophisticated machines or methods when used with intelligence, but too often medical paraphernalia has been invoked unnecessarily. For example, it should be a maxim that diagnostic procedures should only be used if they are likely to yield meaningful information in such a way as will result in improvement of the quality of the life of the sufferer: Times without number, medical tests have been used on those with terminal illness for theoretical rather than practical purposes — (apart from the very practical issue of money which sadly does motivate a proportion of medical practitioners).

Medical care is usually effective when applied to such procedures as the reduction of fractures, the treatment of infectious diseases, and certain necessary surgeries such as hip replacements, the removal of cataracts, etc. There are millions who suffer in the Third World because of preventable diseases. Many of these diseases are treatable with success. Hookworm disease, ascariasis, schistosomiasis, trachoma, and endemic goiter are some examples. But medical technology cannot cure cardiovascular disease, multiple sclerosis, arthritis, stroke, most cancers, advanced cirrhosis and the common cold, etc. Most attempts to heal these have implicit in them the likelihood of producing iatrogenic disease — that is, making a bad situation worse. This is particularly true of most drug therapy. Hydralazine and procainamide can trigger lupus erythematosus; long-acting sulfonamides can lead to Stevens-Johnson Syndrome; enteric coated KCl to small intestine (stenotic) ulcers; methysergide to retroperitoneal fibrosis; warfarin to intramural intestinal hemorrhage; tetracycline to pediatric tooth discoloration, etc., etc. When John Pekkanen, author of The American Connection, examined the links between the pharmaceutical industry and medicine, he concluded:

Contrary to their accepted image and contrary to what the public rightly expects, doctors often know very little about the drugs they are prescribing. Too often all they know is precisely what the drug companies want them to know ... He relies on the detail men, those ambassadors of good will from the industry...

QUESTION:
Are you attacking modern medicine?

ANSWER:
Modern medicine is both a wonderful and a terrible thing. As with religion, law, and politics, and other human pursuits, because of human ignorance and depravity, modern medicine is a mixed affair. At its best it is truly great, at its worst it is highly detrimental to humanity. A Christian physician, who is well read and skilled, is a true leader of men and worth his weight in gold.
QUESTION:
Are you in favor of modern holistic medicine?

ANSWER:
Not as it is popularly conceived. I do believe in caring for the whole person, but so-called holistic medicine often revolves around esoteric ideas which have never been tested. Such things as the macrobiotic diet are not only questionable but dangerous.

QUESTION:
Can't we just rely on our medical specialists to see us through?

ANSWER:
The main factors in health are heredity, environment, life-style, and medical care. It is agreed among medical researchers that the fourth one is of least significance. Thank God for our wonderful medical progress this century. But while you are being thankful, realize that the casting vote for health is not in the hands of your physician. You have that casting vote and nobody else. There are, of course, some exceptions where people have inherited a problem that does not yield to good habits. And also there are certain diseases, particularly infectious diseases, for which medicine has “the magic bullet.” We repeat, however, that these are exceptions and not the rule.

Consider also this quotation from a medical specialist who has been on the faculties of the Harvard Medical School and the University of Pittsburgh Medical School, and who is currently professor of medicine and physiology at Stanford University:

> With some notable exceptions, most of the medical inventions currently employed in normal subjects appear to have little favorable influence on health; many are untested and some are rather harmful or have unacceptably high risks.

Eugene D. Robin, *Medical Care Can Be Dangerous to Your Health*, p. 195. This book was published by Harper and Row this year, but previously was published under the title of *Matters of Life and Death*.

This same writer says:

> Every doctor is frequently uncertain and frequently wrong. As a patient, you must accept this as a reality and not use it as a basis for judging your doctor. (p. 230)

The reader who studies this comment should remember that every patient is even more frequently uncertain and even more frequently wrong. Let me quote once more:

> There are serious flaws in the basic processes by which diagnostic and therapeutic measures are introduced and used in medicine.

> Potential or actual patients can reduce the risks and increase the benefits of their medical care if they are familiar with the flaws of medicine. (p. 231)

Very few, even a minority of physicians, understand the extent of the adverse reactions to widely used drugs. The right drug at the right time, rightly administered, can indeed be a lifesaver, but most drug usages do not fit into this category. More than ten years ago, Commissioner Ley of the FDA declared that 1,500,000 United States hospital admissions annually could be attributed to adverse reactions to drugs. And once in the hospital, one patient in three has an adverse drug reaction. Evidence from a survey at Boston indicates that there's an annual total of over 130,000 deaths due to drugs among hospital patients each year. (But it should be kept in mind that medication deaths occur most often among those who are seriously ill.) No wonder an editorial in *The New England Journal of Medicine* complained:

> All of us have seen too much serious illness from drugs for which the patient had no real need. Vol. 279, 1968, p. 1286

Consider the implication of the following quotation:

> The decline in death rate during the twentieth century must be attributed predominantly to social, economic and environmental causes, not to drug therapy. International studies have shown that among countries with over $600 (1965) per head average income, more sophisticated western medicine leads to higher death rates.


See also the study by Preston entitled *Mortality Patterns in National Populations*, London Academic Press, 1976.

The new move in many areas to guarantee that a patient gets a second opinion about prospective surgery has been forced because of high medical expenses. But a secondary reason is that much surgery is unnecessary and all medical researchers are agreed upon that fact. For example, in this country for years there have been about a million tonsillectomies annually, and the vast majority of them, according to researchers, were wholly unnecessary. Similarly, at least a third of all hysterectomies are unnecessary. But having made these caveats, may we make yet another: “Don't throw out the baby with the bath water.” Thank God for the marvelous medical resources now available to us, including wisely employed drug therapy and surgery.

QUESTION:
Is it true that obstetricians in certain places refuse to care for wives of lawyers and expectant lawyers?

ANSWER:
The mill town of Brunswick, Georgia, is one such place and it is a paradigm for other towns and cities. Complaints by obstetricians are rising in Florida and other states.
QUESTION:
I have heard that there is now concern about the safety of some long established vaccines. Is that so?

ANSWER:
Harvard's medical school in its health letter has sounded such a warning and undoubtedly we will hear more in coming months and years.

QUESTION:
You have spoken about nosocomial and iatrogenic disease in several places. Are things really as bad as you suggest with reference to diseases contracted through wrong medical procedures and through hospitalization?

ANSWER:
At least one in every ten who are admitted to the hospital experience significant side effects from the treatment administered. And at least two out of every five patients suffer from side effects from the drugs prescribed by their doctors. For documentation see O. L. Wade's *Adverse Reaction to Drugs* and *The Lancet* editorial of December 13, 1975, pp. 1189-1191. A press release issued in London by the Pharmaceutical Society in 1977 describes the prescribing practices of the typical doctor as "diabolical," and Sir Ronald Bodley Scott, Chairman of the British Medicines Commissions declared: "Doctors of my generation, particularly in general practice, have no idea how to use 90% of modern drugs." And despite the fact that a large number of visits are made to the doctor by people with viral illnesses which cannot be helped by drugs, most of them receive drug therapy nonetheless. Keep in mind that thousands of prescription drugs have never been shown to be effective, and this is just as certainly true about the majority of over-the-counter medicines.

In the journal *Nature* of February 17, 1977, p. 589, R. Doll declared that X rays given during the 1950s and 1960s to expectant mothers resulted in 5 to 10 percent of all childhood cancers of Western Europe and North America. Add to that the acknowledged fact that about 12,000 people each year die from unnecessary surgery in the USA alone. That is more than the number of American soldiers who died in the Korean and Vietnamese wars. See J. B. McKinley in *Soc. Policy*, Vol 8, No. 29, 1978.

Many of the things most essential for health, such as excellent nutrition, exercise, rest, fresh air, and sunshine, are missing from the hospital environment. Only a very healthy person can survive there for a period without detriment. Having said that, it is still an occasion for thanksgiving to know that such places exist for the very frequent emergencies of our perilous times. Pray for the time when there will be the necessary reforms to prevent at least a major part of the present mass of iatrogenic and nosocomial diseases.

QUESTION:
Is medical practice an art or a science?

ANSWER:
It contains elements of both. It is certainly not an exact science. The medical business is the only business in the world which spends billions on treatments and methods which have not been thoroughly tested. Read the study by Professor Archie Cochran on useless medical treatment entitled *Effectiveness and Efficiency*, published by the Nuffield Provincial Hospital's Trust in 1975.

QUESTION:
Is it true that children can suffer from psychological damage through experiences in the hospital?

ANSWER:
It is certainly true but, nonetheless, the hospital is the place if the necessary medical care cannot be administered elsewhere. Literally millions have suffered psychological damage from early tonsillectomies when a child was divorced from his parents and totally confused and his mind even abused. The Platt Committee of 1959 recommended, "Children should not be admitted to a hospital if there is a reasonable alternative." The evidence is overwhelming that mother-child separation can lead to damaged personalities and antisocial behavior. The worst and most dangerous time for a child to be in the hospital is between the ages of seven months and four years, for this is a period when children suffer most from a separation from their parents. See the Penguin Volume *Maternal Deprivation Reassessed*, by M. Rutter, published in 1972. Some hospitals have wisely showed a film to children which pictures in an acceptable manner what is to be done. This greatly reduces anxiety in the child and increases cooperation. See *Contributions to Medical Psychology*, published by Pergomon Press, 1977, edited by S. Rochman.

QUESTION:
Is it an advantage to know before one's treatment or operation all that is involved, or is it better to be kept in ignorance?

ANSWER:
It is much better to be informed. See the book *Psychology and Medicine*, by Professor S. J. Rochman and Clare Philips. Patients properly informed require less sedation and recover more quickly.

QUESTION:
How widespread is iatrogenic disease?

ANSWER:
According to a book of dubious reputation in some quarters, but thoroughly documented: "Only modern malnutrition injures more people than iatrogenic disease..." p. 26 of Ivan Illich's Medical Nemesis. Even Illich's strongest critics admit that he should be read and that many of his points are undeniably correct. We think this is one of them. See his very solid documentation on this point. Let those who have their doubts consider the ill effects of erroneous drug therapy, particularly that administered to millions of people suffering from moderate hypertension. The latter can be ameliorated by proper diet and exercise, with no ill effects.

QUESTION:
In these days of outrageous malpractice suits, many young men and women have changed their minds about entering medicine. If the legal dilemma were solved, would the medical profession then be a bed of roses?

ANSWER:
No. As JAMA published in May 24, 1985, "Medical school may actually be hazardous to one's health." "The high personal cost of becoming a physician is reflected in the high rate of marital disharmony, suicide, depression, and chemical dependency among physicians" (p. 2958).

QUESTION:
It seems to be taken for granted that Valium, Librium, Darvon, Seconal, Nembutal, Dalmane, and similar drugs can be used indiscriminately. Is there danger in this practice?

ANSWER:
There is much danger. All of these drugs are overprescribed and overconsumed. Each has its place in emergency situations, but those who turn every small trial into an emergency must pay the price for their folly. In the film "Starting Over" where Bert Reynolds faints in a crowded New York department store, and his companion desperately inquires of the crowd, "Does anyone have a Valium?" everyone does have a Valium! As regards the physical problems of everyday life, there are no free lunches. There is a price tag attached to every drug, a price that zaps vitality and health if paid too often. Many people would be better off if they chose exercise as their tranquilizer and employed more the healing effects of good music and innocent humor. After a brief period, most sleeping pills become ineffective and the antianxiety drugs can sometimes worsen depression. Wise individuals will realize that pain is a signal from the body. Very often the message is that we need to eat more wisely, exercise more, or take additional rest. Medication is no substitute for any of these. Best of all is a humble, trusting faith in God. That, linked with obedience to natural law, is the only real panacea.

QUESTION:
Is it true that the use of analgesics can contribute to urinary bladder cancer?

ANSWER:
According to The New England Journal of Medicine of August 1, 1985, p. 292: "The increased risk of bladder cancer in young women who regularly use phenacetin-containing products remained present after adjustments for all other identified risk factors." According to the same article, a ten-year study of healthy Swiss women, aged thirty to forty-nine years, showed an excess of mortality due to urinary-tract disorders among those who freely used phenacetin-containing analgesics.

QUESTION:
Is it true that the introduction of antibiotics, immunization programs, and a variety of drugs are responsible for the decrease in infectious diseases?

ANSWER:
Many researchers have shown in the last twenty years such is not the case. Tuberculosis, for example, a major cause of death in the nineteenth and early twentieth centuries began to decline in the mid-nineteenth century in most industrialized countries, and that was long before the use of chemotherapy. A Swedish study shows that for only three of thirteen diseases investigated, the use of drugs aided the decline in mortality. See such writers as McKeown and Powles.

QUESTION:
Is there a surplus of doctors in the USA?

ANSWER:
Many believe this to be the case, though there is no excess in certain areas of the country. Since 1965, the number of medical schools has increased from 94 to 142, and the first-year enrollment has doubled. There are over 500,000 doctors now licensed in the U.S., whereas in 1970 there were only approximately 330,000. A 1982 American Medical Association poll discovered that 73 percent of doctors believe that there is a current or impending surplus of physicians in certain specialties. They agreed that the USA particularly has too many surgeons. It is considered that by the end of this decade there will be major surpluses of surgeons, obstetricians-gynecologists, cardiologists, pediatricians, and diagnostic radiologists. While California's population rose approximately 12 percent between 1970 and 1983, its number of doctors grew 55.6 percent. In many less-favorable geographical locations, doctors are much rarer. One reason why the situation is considered dangerous, is that "health leaders worry that the largest social purpose of healing the sick will be subordinated economic survival" U.S. News and World Report, December 19, 1983, p. 62. However, it must also be said, that because of increasing government legislation ["interference"] and the ever-increasing malpractice menace, there may be a falling away of numbers in medicine.

QUESTION:
Is coronary-artery surgery increasingly acceptable today?
ANSWER:
No. See the article in The New England Journal of Medicine, of September 22, 1977, for an early criticism of such procedures, a criticism which has been multiplied since that date. Coronary-artery surgery is accepted by most as acceptable in certain situations such as serious angina, but the majority of instances of such surgery were unnecessary and continue to be so. There is no evidence that in most cases coronary-artery surgery has prolonged life. It is quite certain, however, that it lessens pain for certain angina sufferers.

QUESTION:
You have spoken about the wonders and the terrors of modern medicine. Could you please indicate briefly what you mean?

ANSWER:
Modern medical care has worked wonders for juvenile diabetes, pernicious anemia, certain types of pneumonia, tropical diseases, infectious diseases such as diphtheria, tetanus, poliomyelitis, and tuberculosis, surgery often removes pathogenic organs, and penicillin, sulfa drugs, and antibiotics in general have saved millions of lives. Procedures, such as reduction of fractures, and many other comparatively simple therapies, have been the source of blessing to untold numbers. On the other hand, the antibiotics have spawned a host of resistant bacteria which now kill huge numbers annually. Unnecessary surgery takes the lives of about 12,000 a year. The unwise use of drugs is responsible for about 130,000 deaths a year. Modern medicine tends to prolong dying rather than to prolong living, for it cannot cure cardiovascular disease, most major cancers, arthritis, multiple sclerosis, stroke, advanced cirrhosis, etc.

QUESTION:
What should you do if you believe you are being treated by an impaired or incompetent physician?

ANSWER:
According to the statistics, of every ten doctors you see in the hospital, at least one is either incompetent or impaired mentally or physically. The New York State Health Commissioner declared the situation in his jurisdiction to be a "public peril." Change doctors.

QUESTION:
How widespread are nosocomial infections?

ANSWER:
The estimates range from as high as 100,000 infection-related deaths to 300,000 a year. From 5 to 10 percent of hospitalized patients (about 2 million people) acquire hospital infections annually. In about 3 percent of those cases the infection is the cause of death. Let it be emphasized that these deaths are not usually the results of negligence on the part of hospital staff. Most of them come from the microorganisms and pathogens that thrive in a hospital. There are about 300,000 patients a year who develop pneumonia in the hospital, partly as a result of the body's immune system being suppressed by the abundant use of drugs. About 40 percent of all nosocomial infections are those of the urinary tract, often because of urinary catheters.

QUESTION:
Is there universal agreement about the advantages of intensive care units?

ANSWER:
No. Experts still debate their benefits. Infants are often greatly benefited there and some in life-threatening situations. Others well enough to be influenced by the special trauma would do better in their home bed. Keep in mind that the charge for daily ICU care is about $1,000 and up, and the average cost is about $25,000 – $30,000 per stay. The issue is of no slight importance.
The doctor said: this-and-that indicates that this-and-that is wrong with you, but if an analysis of this-and-that does not confirm our diagnosis, we must suspect you of having this-and-that. If we assume that you have this-and-that, then ... and so on. There was only one question Ivan Illyich wanted answered: was his condition dangerous or not? But the doctor ignored that question as irrelevant. From the doctor's point of view, such a question was unworthy of consideration. One had only to weigh possibilities: floating kidneys, chronic catarrh, or an ailment of the caecum. There was no question of the life of Ivan Illyich — nothing but a contest between floating kidneys and the caecum. In the presence of Ivan Illyich the doctor gave a brilliant solution to the problem in favour of the caecum, with the reservation that the analysis of his water might supply new information necessitating a reconsideration of the case.

Tolstoy, "The Death of Ivan Illyich"

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**QUESTION:**
Do medical researchers still have concerns about pollution from lead, benzine, as well as pesticides, etc.?

**ANSWER:**
Assuredly. See, for example, The New England Journal of Medicine's opening articles in its April 23, 1987, edition. New concerns have also been expressed by researchers about the levels of pesticides found in our daily foods.

**QUESTION:**
Despite recent changes, and stricter controls, is there still concern about the use of asbestos?

**ANSWER:**
Very much so. See The New England Journal of Medicine, April 2, 1987, p. 882, and the letter by Drs. Langer and Nolan. This letter is replying to another that charged that certain sand being marketed in New Jersey was contaminated with 2 to 4 percent tremolite asbestos. The writers of the more recent letter deny the charge, but the fact that the Journal printed both shows the concern is a real one and has not been laid to rest.

**QUESTION:**
Are doctors concerned with passengers smoking on commercial airplanes?

**ANSWER:**
Yes. See, for example, The New England Journal of Medicine, April 9, 1987, p. 952. There Dr. William B. Ershler says:

> With the accumulating data supporting the health hazard of cigarette smoke even when passively inhaled, I would like to propose that airline officials consider new strategies for reducing smoke pollution in the nonsmoking sections or discontinue the policy of allowing cigarette smoking on the airplane — which, after all, is a closed vessel with restricted ventilation.

**QUESTION:**
How dangerous is marijuana for drivers?

**ANSWER:**
About three-fourths of those arrested for driving under the influence of liquor have also been using marijuana. The drug interferes with the attention processes and perception in general, and when combined with alcohol, strongly affects judgment and driving skills. Furthermore, while alcohol is comparatively quickly evacuated from the human system, the principle dangerous ingredient of marijuana (THC) can take weeks to disappear.

**QUESTION:**
I understand there are old and new X-ray units, and that the old ones can be dangerous. Is this true?

**ANSWER:**
Yes, it is true. The X-ray tube used for medical X rays should have an adjustable, rectangular beam restricter in its front. If it is a dental X-ray unit, it should be one with a long, open-ended, lead-lined cylinder on the end in preference to one with a short, pointed plastic cone. Some old X-ray machines which lack adjustable collimators or localizing light can be used safely if the operator uses a cone that restricts the area of the circular beam to about that of the film. Modern ultra-speed X-ray film reduces exposure by about two-thirds compared to earlier units, and the new electronic timers make for short exposure times and lessen the number of retakes.

**QUESTION:**
Is it true that the stronger the immune system, the less likely it is for bacterial infection to threaten the health?

**ANSWER:**
Yes. The environment in which infectious diseases take place has changed dramatically in recent years, for the new battleground now is often the hospital itself. Hospitals abound in gram-negative bacteria which have surface structures that
permit them to adhere to respiratory, gastrointestinal, and neurogenital cells. Those who have defects in their immune system of immunoglobulins, T cells or white cells, are less able to resist these invading forces. Therefore, the wise person does what he can daily to maintain a good immune system by sensible life-style habits.

**QUESTION:**
What are the main causes of death in middle-aged males drawing close to fifty years of age?

**ANSWER:**
Cancer, cardiovascular disease, and alcohol-related deaths. The three are almost equally proportionate. The majority of such deaths could be prevented by knowledge and self-discipline. For a lengthy discussion on the subject, see the *American Journal of Medicine*, September 1984, p. 418ff.

**QUESTION:**
Do asbestos victims ever sue the companies responsible for their illness?

**ANSWER:**
More than 16,000 people have sued the Manville Corporation over the last 20 years in this connection. The end is not yet, such cases will probably continue to multiply.

**QUESTION:**
It has often been said that to use alcohol moderately is a plus likely to increase one's life span and benefit one in numerous ways. Is this really so?

**ANSWER:**
You are right that these assertions have been frequently made. According to a recent Harvard Medical School Health letter, the studies that drew such conclusions misinterpreted their "evidence." The real situation is otherwise, and the teetotaler on many grounds is ahead health wise.

**QUESTION:**
Is air pollution in the home becoming a matter of increasing concern?

**ANSWER:**
Yes. Many homes and businesses are "sick" because of inadequate ventilation and a variety of polluting vapors etc., as well as radon. Every home should be closely scrutinized in this regard and every business likewise.

**QUESTION:**
What is the typical death rate in this country?

**ANSWER:**
About 1 percent per year. So in the USA approximately 2 million die annually.

**QUESTION:**
Is neurosis more common in higher socioeconomic groups or lower?

**ANSWER:**
The answer is the opposite of what might be expected. Neurosis, like suicide, is much more common (almost twice) among the have's than the have-nots, the educated than the uneducated. Keep in mind that the worst neurosis consists in knowing what is required for good health but not being willing to do it.

**QUESTION:**
Are chronic diseases increasing?

**ANSWER:**
There has been a tremendous improvement in the statistics for heart disease and strokes in the last fifteen years. Nevertheless, Lowell Levil of Yale University estimated that within a single generation, this century, chronic diseases more than doubled. It should be emphasized that we now have enough knowledge about nutrition, exercise, and psychosomatic factors to enable us to at least postpone if not eliminate such health problems. Dr. James Fries has documented his conclusion that "the average age at first infirmity can be raised" *New Engl Journal of Med*, Vol. 303, No. 3, July 17, 1980, p. 130.

**QUESTION:**
Your approach to me seems to put too little dependence upon the miracle-working power of God. Are you denying that power?

**ANSWER:**
Not for one second. But the words of Scripture "Work out your own salvation with fear and trembling for it is God that worketh in you both to will and to do of his good pleasure" (Php 2:12, 13) applies to physical wholeness as well as spiritual. What man can do, man must do. We should pray as though all depended on God, and then work as though all depended on us. God has given us faculties and means us to use them. All scientific discoveries are really his gift. As regards barriers to health, he says to all, "Roll ye away the stone" (Jn 11:39). Christ could have removed the stone miraculously, and also the binding clothes of the resurrected Lazarus, but he did neither. He called on men to do both.
Consider the following:

The attitude of the magic and occult movement in our culture, therefore, is not to deny the results of science, but rather to downplay and devalue their intellectual and philosophical significance in relation to reality. The style of its expression is to pour scorn on the tradition of science as mere child’s play in comparison with the real secrets of power known only to the initiated ... It is just here that a powerful temptation exists for the Christian ... He is liable to accept the magical view of the world ... and thereby devalue and discard the image of the world as a consistent, orderly reality – the great treasure of the scientific enterprise ... This is a terrible and tragic error, not only for the future of science but for the health of mankind.


QUESTION:
Why do you continually link health and religion?

ANSWER:
Because only he who made the human machine can speak with absolute authority on the subject of its care and preservation. The Bible not only admonishes us “Do thyself no harm” (Acts 16:28) but it gives many clues to good health. Therefore, we urge secular minds to consider the Word of God and remind professed Christians that science and nature have much to teach believers, for has not God said, “First ... that which is physical, and afterward that which is spiritual”? (1 Cor 15:46 RSV).

QUESTION:
As a Christian, why not just say to sufferers that they should claim healing from God?

ANSWER:
Because, as a rule, God never does miraculously what we can do naturally. This is obvious in every department of life, not just in health. God doesn't sow the fields for us, or develop our muscles without our exercising. Neither does he do the looking for us when we as pedestrians cross at busy intersections. God can and does heal miraculously when it can be to his glory, but it is never to his glory to continually heal those who are breaking his natural laws and generally living carelessly.

QUESTION:
Is it true that until the late nineteenth century, blind people were considered to have less intelligence than people with sight?

ANSWER:
Sadly, this myth was popular last century. In the eighteenth century, under law, both blind and deaf were classed as idiots. For excellent discussion of these follies, see the biography Helen Keller by J. W. and Anne Tibble.

QUESTION:
It seems to me that much functional illness is the result of disappointment and frustration springing from association with corporate structures including even the Christian church. Have other seen this?

ANSWER:
Yes, the writings of the Niebuhr brothers include significant analysis of this problem and the English writer, Harry Blamires, touches on it in his book, The Will and the Way. There he wrote as follows:

We work within bad systems, in bad institutions, under the wrong superiors. The Church itself, in so far as it is a human institution, suffers from the corruption inherent in all man-made systems. Thus, in one more direction, the individual finds himself involved in that pattern of experience which we defined in Chapter I. Setting out with high ideals, determined to give of his best in his chosen avocation, he comes gradually to the knowledge that possibilities which he had confined to the very fringe of his realizations, belong in the dead centre. The possibilities I refer to are: that the men who have authority may be unfit to wield it; that those who have power may have been corrupted by the very gift and exercise of power; that those who lead will put vanity and self-interest before justice and integrity; that the ambitious will pander to bad superiors and flatter their very weaknesses; that those who rule will put prestige and popularity before principle and loyalty.

Does this sound shocking? It ought to do so. Does it sound outrageously false? It ought not to do so: not, at least, to the Christian; for it is only a practical illustration of the truth of the doctrine of Original Sin; only a reluctant admission that we are up against the World, as well as the Flesh and the Devil. We ought not to be too surprised that this is so. When the time comes at which we must truly and personally face up to the world's rottenness, we are indeed brought, whether we admit it or not, to the threshold of faith. For experience leaves us with only two alternatives. Either we must escape from real contact with life into cynicism, sloth, neglect, or day-dreaming. Or else we must bring into the very centre of our realizations the fact that the world is the World, corrupt and corrupting: we must embrace the realization, grip it, scrutinize it, make it fully our own and fully meaningful. For if it is not made fully our own, we deny the evidence of our own experience; and if it is not made meaningful, life itself is rendered meaningless at the centre, where effort and aspiration are born.

The preceding pages of Blamires’ chapter discusses the widespread frustration resulting from this situation.

QUESTION:
Isn't it overdone when people talk about the mind predisposing the body to illness?

ANSWER:
Not at all. Whatever affects the body affects the mind and vice versa. There is good evidence that a positive mental attitude increases the chance of survival for women with breast cancer (and even helps in such a minor matter as the common cold). Research shows that this problem is most likely to strike people who are introverted and who react excessively to stress. Angina, high blood pressure, backache, ulcers, asthma, skin diseases, headache, and a multitude of other ills have a strong psychological component and in some cases are triggered by emotional upsets.

**QUESTION:**
Can you give me the title of a scholarly but readable book dealing with simple health habits?

**ANSWER:**
The Oxford University Press, in 1983, published *Health and Ways of Living*, by Lisa F. Berkman and Lester Breslow. It is a report of the Alameda County Study which showed how simple habits, such as daily exercise, adequate rest, eating a good breakfast, not eating between meals, refusing tobacco, and avoiding alcohol excess, etc., could add years to one's life. The work is altogether scholarly and its conclusions seem undeniable. We heartily recommend it.

**QUESTION:**
Have the governments moved quickly to implement the newer knowledge on nutrition as a means of saving multitudes of lives?

**ANSWER:**
No. Take this statement from *The Lancet*, of August 6, 1983, for an example:

> Today Britain has the highest recorded mortality rates for coronary disease in the world. All physicians, and particularly those concerned with our high coronary mortality rates should press the DHSS to take a much firmer stand in what is considered by nearly every medical authority to be a fundamental cause of heart disease – our national diet.

Too often, lobbying from the food industry and the dairy industry makes government wheels turn very slowly indeed. And unlike the wheels of God, which at times also seem to revolve slowly, the government wheels do not always grind fine. In the same edition of *The Lancet*, on page 319 we read:

> In 1979, the government set up a National Advisory Committee on Nutritional Education, NACNE. A sub-committee was appointed to recommend its nutritional guidelines for health education in Britain many of which are, of course concerned with IHD. Besides making specific proposals, the report apparently recognized the difficulties the food industry would face and consequently suggested a prolonged time-scale over which changes could be made ... However, the industry apparently disliked much of what it read and seemed to have gotten the Department to suppress or at any rate delay the report. If so, the Department should think again, quickly. It is precisely this sort of occurrence that will slow the progress now underway towards agreed policies.

**QUESTION:**
Are there real advantages to storing one's own blood in case it is ever needed in medical emergency?

**ANSWER:**
*The New England Journal of Medicine* recently reported that over 1,000 hospitals in the USA now make provision for the storing of blood by individuals, in anticipation of a later need. The risk of contracting AIDS has been a major factor in this, although the risk is minute because of the screening of blood used in transfusions. But yearly, about 100,000 Americans contract hepatitis from blood transfusions, and there are other problems.

**QUESTION:**
I often hear that Americans are about the most healthy people on earth, but occasionally I hear the opposite. What is the truth?

**ANSWER:**
We think Robin Hur's statement in *Food Reform: Our Desperate Need* is accurate:

> The truth is that degenerative disease afflicts most Americans by early childhood and seemingly all Americans (taking the normal U.S. diet) by early adulthood. The truth is almost all Americans die of degenerative disease: the "lucky" ones go from sudden, unexpected heart attacks or strokes; others are given veritable death sentences by surviving a stroke or heart attack; still others watch while diabetes, osteoporosis or multiple sclerosis slowly erode their being. Others suffer the horrors of cancer. The truth is none of these diseases are necessary, and there is every reason to believe these maladies are self-inflicted. The truth is our eating, drinking and smoking habits have been directly implicated in every major form of degenerative disease. The truth is that meat, eggs, dairy products and fats and oils head the list of ill-chosen food items. The truth is sugar, salt and refined grains are willing accomplices, if not equal partners, in the path to degeneration. The truth is alcohol, coffee and such standbys as aspirin, are all implicated in major degenerative diseases. The truth is smoking affects a lot more than emphysema and lung cancer though the latter is sufficient to classify cigarettes as deadly. The truth is no scientific miracle is going to correct greed and over-indulgence; no pills or powders will prepare the intestines or liver or kidneys for the onslaught of excesses and toxins in today's, much less what technologists picture as tomorrow's diet. (pp. 60-61)

**QUESTION:**
What is the maximum life span?

**ANSWER:**
About 110 years. There are few documented cases of people living long beyond that point. In almost all cases people die, not because the body as a whole is worn out, but because one particular part of it has been abused and ceases to function.

**QUESTION:**
Is the decree to enter a hospital usually an infallible one?

**ANSWER:**

> It is estimated that 70-80 percent of the people who go to doctors have nothing wrong with them that wouldn't be cleared up by a vacation, a pay raise, or relief from everyday emotional stress. Only 10 percent require drugs or surgery to get well, and approximately 10 percent have diseases for which there is no cure.

It is true that because of increasing government interference, it is not as easy to get into hospitals as it once was. In the long run, this may be of considerable advantage to the patient, though in some cases that is certainly not the fact.
DON'T FORGET!
SUMMARY OF THE PRINCIPLES OF PREVENTIVE MEDICINE SET FORTH IN THIS BOOK

Summary

The Principles of Preventive Medicine Set Forth in This Book – Prevention is better than cure.

What you don't know can hurt you, even kill you.

Life is causal, not casual.

Seventy percent of diseases are diseases of choice. Ninety-nine percent of us were born healthy.

The chief cause of sickness is faulty life-style.

The number one cause of death in the Western world is suicide by knife and fork.

Infectious diseases were removed chiefly by preventive medicine – improvements in hygiene, nutrition, and housing.

Chronic diseases can only be removed similarly. Chronic diseases for the most part are not curable. Therefore, minutes or cents each day now to prevent disease can do what years and thousands of dollars cannot do later.

The most that modern medicine can do in the majority of cases contributes only 10 percent to the health of the individual. Personal choices have most to do with the other 90 percent.

Nine-tenths of ills are self-curing. Most problems are cured by time or are not cured at all. (There are important exceptions, such as the use of B12 for pernicious anemia, insulin for juvenile diabetes, antibiotics for pneumonia, and drug specifics for tropical diseases. All such combined still amount to less than 10 percent of human sickness.)

Almost all medical tests have dangers. False positives and false negatives are similarly traumatic. Wrong results can lead to unnecessary surgery or drug medication. Most medical tests are helpful only when the candidate already shows obvious symptoms of the disease being tested for.

Much of surgery is unnecessary. One hundred thousand women in the USA annually have unnecessary breast amputation, about one-third of hysterectomies are unnecessary, and about half a million tonsillectomies are also inexcusable.

There is a potential thirty-years' difference in length of life between a poor life-style and a good one.

The main clues to good health are intimated in the Genesis creation story. The right use of air, sunshine, water, good food, exercise, rest, and trust in God, are the best of all remedies.

Body and mind are as closely intertwined as the yolk and white of an egg in an omelet. Whatever helps or harms the one does likewise to the other.

When the Bible calls for temperance in life-style and the expulsion of unlawful passion, pride, envy, remorse, hatred, etc., it is up-to-date with the best that is known in psychosomatic medicine.

Christian piety with its emphases on faith, hope, love, and the dynamic of the indwelling Spirit of God, can contribute more to health than all medical technology.

When Scripture calls for control of the thoughts and reminds us that out of the heart are the issues of life, it is giving us a health-giving secret that transcends all that can be found in medical books.

To be aware that every situation has two handles to it, one positive and the other negative, and to choose by faith the former and reject the latter is a prophylactic beyond parallel.

Natural law is the law of God. That divine law is written on every nerve, sinew, and fiber of our being and only those who realize that by the grace of God they are the temple of God, redeemed by the sacrificial death of Christ, have the right motivation to present their bodies a living offering to their Creator.

The good news of the gospel is the most powerful influence on the lives of men. It enables them "for joy thereof" to forsake ruinous habits and to live to the glory of God. Nothing else will do.
Conclusion

Three out of every four people in the Western world are dying from atherosclerosis and cancer. We now know that the cause of these deaths is not primarily heredity or something in the environment that is inevitable, but rather the western way of life, with its refined foods, sedentary life-style, and intense stresses. There are population groups within America, Australia, England, and other countries, whose death rate is only about one-eighth that of the rest of the population, and the reason is their contrasting life-style. The members of such healthy groups are largely vegetarian, eat unrefined foods, and exercise regularly. Happy is the person who learns early that most diseases are diseases of choice.

Modern medicine is curative, not preventive, and only curative in a very minor sense, for the majority of chronic diseases cannot be cured. Almost all the efforts of the medical establishment are equivalent to the shutting of the stable door once the horse has bolted. Denis Burkitt's illustration of the running faucet from the wall of the operating theater, while doctors and nurses are busily occupied in trying to mop up the water with cloths, rightly represents the modern medical scene. It places the ambulance at the foot of the cliff rather than a fence at the top.

As a result of these wrong methods and because of excessive dependence upon high technology and drugs, medical expenses have assumed mammoth proportions, far exceeding that ever known before. Medical expenses for years have outstripped inflation often by several times. No government can sustain such escalation. Canada has been among the first of the nations to recognize this and is making gargantuan efforts to remedy the situation by stressing the need of preventive medicine over and above curative practices. Ivan Illich is right when he says that "The health professions are on the brink of an unprecedented housecleaning campaign."

Only in our generation has it been widely recognized, as Dr. Albert Schweitzer realized, that the main reason for medical successes over the centuries has been a psychological one — the placebo effect. Only in this century has medicine rightly been able to claim that it is to some degree scientific. And even in our day progress has been by trial and error, much like the incoming tide, inflow and recession, but progress upon the whole. Even until the present decade, most physicians have been ignorant of the nutritional causes of the majority of chronic illnesses. Doctors have had little or no training in the most important health area of all — nutrition. Second, modern physicians use drugs as their main resource, despite the fact that their training in pharmacology is very limited indeed. Third, in evidence of the inadequacy of their own training, the majority of doctors have had a very unhealthy life-style. They lead almost all other professions in the suddenness of their demise. As a profession, they are among the highest in divorce rate, heart disease, alcoholism, drug abuse, and suicide.

Job satisfaction is at an all-time low among physicians. With the development of extensive medical testing, and the use of high technology, personal relationships between physicians and patients have deteriorated. The threat of malpractice suits has intensified this deterioration. Awareness of the inadequacy of modern medicine to cure the chief diseases of mankind has added to the discouragement of many conscientious physicians. Add to that the ever-increasing interference by government which threatens to hamstring even the most capable of doctors; and it is obvious why many are opting for early retirements, while young men who otherwise would have chosen a medical calling have changed their intentions and have joined other professions. Too often, for those who remain, as George Orwell said, "Orthodoxy is unconsciousness," and there is a hardening, not just of the arteries but of the categories, by which we mean a fixedness of ideas which ignores the relevant evidence.

The most progressive of modern physicians now recognize that health is not primarily or even essentially a medical matter. Such writers as Thomas McKeown, Rene Dubos, Ivan Illich, and John Bradshaw, have proved that most improvements in general health over the last two centuries are not the result of more medical care, but spring from environmental and hygiene changes. Dr. John H. Knowles, late president of the Rockefeller Foundation and one of the country's outstanding clinician administrators, is representative of that group of medical thinkers who have called for a revolution in the medical realm. Researchers, Dr. John W. Farquhar, of Stanford University, and Dr. Eugene D. Robin, formerly of the Harvard Medical School and now at Stanford, represent those who warn against the folly of trusting to orthodox medicine as the way of guaranteeing health. Robin has gone so far as to even entitle his book Medical Care Can Be Dangerous to Your Health, which is an echo of Ivan Illich's contention that modern medicine is a primary cause of today's widespread illnesses.

We are not talking about so-called holistic medicine, or the lunatic fringe of medicine, when we mention the modern challenges to medical orthodoxy. The arguments of men like Rene Dubos, Thomas McKeown, Archibald Cochrane, John Powles, Ivan Illich, John Bradshaw, and a host of others including Coleman, Davies, Dixon, Gallagher, Gross, and Maxmen, are now widely accepted. Government reports embody many of the contentions of these men. See Lalonde's reports on the health of Canadians and the Shrivastava Commission on health care in India, and the studies on "Health and People," produced under the guidance of Dr. H. Mahler, of the World Health Organization, and also the British Labour Party document, "The Right To Health." The WHO document declares:

There is widespread disenchanted with health care throughout the world. The reasons are not difficult to discern. Better health could be achieved with the technical knowledge available. Unfortunately, in most countries this knowledge is not being put to the best advantage for the greatest number ... Health systems are all too often being devised outside the mainstream of social and economic development. These systems frequently restrict themselves to medical care, although industrialization and deliberate alteration of the environment are creating health problems whose proper control is far beyond the scope of medical care ... they have been distorted by the dictates of modern technology and by the misguided efforts of a medical industry providing medical consumer goods to society ... The time has come for all levels of the health system to review particularly their methods, techniques, equipment and drugs, with the aim of using only those technologies that have really proved their worth and can be afforded ... there has been a tendency to concentrate on medical technology ... there are many ways in which the community can participate in every stage of primary health care. Such cooperation includes the acceptance by individuals of a high
degree of responsibility for their own health care—for example, by adopting a healthy life-style, by applying principles of
good nutritional hygiene, or by making use of immunization services...

[This document published by WHO in Geneva, 1978, should be read in its entirety.]

Stressing the urgency of preventive medicine, it says:

The health professions have a major responsibility for the standards of their own members insofar as excessive and
unnecessary medical intervention can itself be a cause of ill health...

It is quite certain that the conception or ideology of health that has prevailed for most of the century is now outdated. Which is
not to deny the many insights that such medical theory holds. It is the emphasis that is now under question. Preventive
medicine alone can cope with the rising tide of chronic diseases.

For those who may question whether such government documents are really consonant with the facts, we would point out that
there is no facet of life that does not have its share of delusions and myths, including science in general, and health science
especially. Perhaps the greatest myth of all, as Brendon McGann has declared, is the idea that professional men are entirely
objective, scientists in particular. The fact is, all research and ultimately all convictions are largely controlled by prior
assumptions, many of which are untested. Myths persist, even in our modern times, even when there is ample evidence to
refute them. For example, while there are no recorded instances in history of packs of wolves attacking human beings, the
majority of people think otherwise, and the theme has been commonplace in literature. Similarly, most people think it is
impossible for a girl to bear a child before she begins to menstruate, though such is certainly not the case. McGann mentions
another myth which prevails in many dramatic portrayals, namely that quicklime can consume a dead body. The fact is that
quicklime is a preservative. The import of these analogies is that medicine, as every other field, has had its share of myths,
and these can be perpetuated despite abundant evidence showing their fallacious nature.

Today there is overwhelming epidemiological evidence that the major risk factors leading to heart disease, cancer, stroke,
AIDS, and the majority of chronic diseases, spring out of faulty life-styles. In other words, most disease is preventable, and, of
course, this means that most medical expense is preventable, and most human pain and suffering likewise.

What is now needed is not more information, but the implementation of information already available. Those researchers who
have investigated diets in both children's hospitals and adult hospitals have found disastrous situations in almost all cases.
Hospitals have helped to provide their own continuing business by shocking malnutrition.

Innumerable are the traditional medical procedures taken for granted that are actually expensive and debilitating
achronisms. For years, mass screening programs, such as chest X rays, were pursued at tremendous expense and without
any justifiable cause or fruitful results. When it is realized that more than three-quarters of hospitalization results from
personally chosen self-destructive behavior, the need for change will be seen even by the most closed mind.

Almost all of the medicines and medical methods employed over the centuries have been intrinsically valueless. It is the
placebo effect that explains the continuance of such medicine despite its inadequacy. All should read A. K. Shapiro's articles
on this topic. 1

During the 1930s, Ayman, a physician, published the paper reviewing thirty-five different studies of the use of drugs for the
treatment of high blood pressure. Ayman was surprised that each study reported either complete or significant relief. His
surprise grew out of the nature of the drugs mentioned—they included mistletoe, heat treatment, watermelon extract, drops of
dilute hydrochloric acid, and many such. Because all the drugs so employed were radically different, he was forced to
conclude that the only common factor was the placebo effect. Other writers, including Lasagna, Beecher, Evans and Hoyle,
have written at length on this matter, and in more recent times Norman Cousins has discussed it in The Anatomy of an Illness.
As Dr. Coleman has pointed out, makers of medicines depend on the placebo effect, for they can assume that almost any
product without dangerous side effects can have up to 40 percent success in the marketplace. Doctors in Britain give placebo
prescriptions in 30-40 percent of cases, knowing well that even for angina, nausea, headache, and many other conditions,
effectiveness will rate between 30-40 percent.

W. R. Houston, in his article "The Doctor Himself a Therapeutic Agent," Ann. Int. Med. has an excellent illustration of the
pervasiveness of the placebo effect throughout the centuries.2 He says that the pages of medical history are like the log of an
old-fashioned ocean voyage which records such events as a whale spouting, or a flying fish being seen, or floating driftwood,
etc., but makes no mention of the main environmental fact—the unending green waste of water. Remembering that the word
placebo did not come into effect until the nineteenth century, and the fact that medical practitioners are naturally reluctant to
admit the impotence of their potions or pills, it is not difficult to see why this fundamental truth about medical practice has been
ignored until recent times.

The well-read person today will realize that professional medicine is like professional religion, professional law, and
professional politics—a two-edged sword. All have their legitimate place rightly used, all do tremendous damage when
misused. Strangely, while few moderns trust their material possessions to the keeping of another, we do hand over that which is
more important—we health. The reason is that given by Erich Fromm in his Escape from Freedom—only a few dare to take
the responsibility of making their own decisions in life. For this reason, Christians have a head start in the matter of health.

An intelligent Christian, prompted by the Holy Spirit, dedicates mind, soul, and body to God, and distrusts his own wisdom.
Only the awareness that "you are not your own; you were bought with a price" (1 Cor 6:19, 20 RSV)—even the precious blood of
Christ—can motivate weak and foolish human beings to change the pattern of their lives to the glory of God, the profit of
their fellowmen, and their own ultimate eternal joy. A believer who rightly reads the present health scene is equipped to fight
the battle of life successfully and joyously. Those without faith, who refuse to heed the lessons of the health situation in the
Western world, invite failure, decay, and death. But we wish to be more specific.
The facts offered in the preceding pages have tremendous implications for all. For the professions, the practical import is that they should begin to shift their stress from curative medicine to preventive medicine. But, for the majority of the population, the facts presented signify a warning against all unnecessary medical intervention. While no one can deny the near miracles of modern medical achievement in many fields and the tremendous lifesaving effect of therapies involving insulin, vitamin B12, the antibiotics when appropriately used, etc., it remains true that frequently the classic forms of medicine can cause further decline rather than health improvement. Probably the proportion of problems requiring professional help is about 10 percent. In the vast majority of instances, physical wellbeing can be maintained or restored apart from cutting, burning, or poisoning, that is, apart from surgery, radiation therapy, or drugs.

The unforgettable lesson from the facts now acknowledged by all researchers is that one should be slow in following the mob. The typical patient errs as surely as the typical doctor. Follow neither professionals nor laity. In the 1940s it was the common practice to begin smoking in adolescence. All the movie heroes of that era did it and many of them died with lung cancer. The fatal habit was unquestioned until the 1960s. Those who refused to participate were looked upon as strange and unnecessarily square. With hindsight we applaud their wisdom. Similarly, there are many habits and practices today followed by the majority which will be rejected in coming years. The use of refined foods, refined flour, refined sugar, refined fat, is becoming recognized as a suicidal practice, and intelligent people will do as they have already done regarding the use of nicotine – they will abstain. Again, the free use of prescription drugs inevitably will be rejected by intelligent people of coming decades as the evidence of the danger of these drugs becomes more widely known. The perils of sedentary existence, excessive stress, unceasing work, and the foolish delegation of responsibility for one's health to paid professionals, will also be increasingly shunned.

Leading governments of the world are now stressing the responsibility of each individual to care for his or her own health. The age of curative, emergency, medical measures is passing and will be replaced by an era that recognizes that, in most instances, health or disease is the outcome of our own cherished habits. Multitudes will become aware as never before that, provided they do their best to obey the laws of life, most of their diseases will prove to be self-limiting and will not require medical intervention. The new doctor will no longer be a slave to the pharmaceutical industry or modern technology, though he or she will have respect for the benefits offered by each. The doctor will become an educator in lifestyle, particularly in nutrition, exercise, and psychosomatic medicine. Edison's, dream that the physician of the future will give no medicine will be largely realized. While a limited number of well-tried drugs, surgical proceedings and vaccinations, will continue to be useful, the majority of health measures will be those employed by the individual in carefully choosing right habits.

Intelligent observers of this century's passing parade, especially the health parade, perceive that all of life is governed by cause and effect relationships. They recognize the inviolable nature of law and logically reason that this reign pertains to the higher levels of existence as well. For example, the AIDS epidemic has made it clear that the universe is on the side of purity and morality. We may safely shake hands with a thousand different people in a year, but the universe will not favor our sexual relationships with a multiplicity of people. And the fact that so far no cure has been found for AIDS, and that many researchers consider no cure will ever be found, parallels the situation with the major chronic diseases wherein palliation, and not cure, is the best medical science can offer. Thus, prevention is the only wise way to go, and prevention in effect signifies obedience to the laws of the Creator, both natural and revealed.

Mankind has long recognized that there is a balance in nature which cannot safely be disturbed. Now, increasingly, we are recognizing that the same applies to all of human life. A healthy life includes work and rest, the secular and the sacred, right relationships with time and eternity, earth and heaven, God and man. Many of our troubles have emerged from our careless breaking apart of what God has joined together and healing can only come by the reverse procedure. And the lesson of priorities whereby we recognize that dietary practices, mental habits, and the use of the muscles have priority over all other health endeavors, suggests also that in the spiritual realm there must be an awareness and a willingness to practice "first things first." Modern man has sought to have rights without responsibilities and pleasures without pains. But this is contrary to the nature of existence.

Life is not a playground but a schoolroom. And the conditions of graduation include heeding the teacher and his lessons well. The Book that has done most to rescue our race from barbarism must, along with the book of nature, be given its proper place, and its Author due reverence. To love God with the whole heart, mind, and strength, and our neighbor as ourselves summarizes the priorities of human obligations. To that end good health is necessary, for health is what we must have to do what we must do. But the best of health should include the quality of life which will transcend death, and this is possible only to the believer. For "He [she] who has the son has life; he [she] who has not the Son of God has not life" (1 Jn 5:12 RSV). Those who meditate on the cross of Calvary will become aware of how much they have been loved. "For joy thereof" they will run in the path of all divine commandments whether found in the book of nature or the Book of Scripture. For them, this world and the universe will yield their treasures through time and eternity – and nothing will be impossible.

REFERENCES

Recommended Reading

Never before has there been so much literature on medical matters and preventive medicine in particular. Much of this literature is not of high value for the ordinary layperson motivated by practical rather than theoretical concerns. We would recommend that, as a rule, only those books and articles are worth reading which show evidence of being the fruit of considerable research. The writer who is content only with setting forth his own intuitive convictions, and who ignores epidemiology and empirical studies is rarely worth attention.

Among the books which should be read are the following:

None of These Diseases, by S. I. McMillen, M.D. This is a popular rather than technical work but is a splendid summary on preventive medicine. The writer is not only a physician but a Christian, and one who has done his homework well. Minor matters in the book are debatable but overall every reader will profit from it.

Doing Better and Feeling Worse, edited by John H. Knowles, M.D. While now a decade old, this work remains a classic on the present status of contemporary medicine and the problems it faces. Particularly attend to the chapter “The Responsibility of the Individual.” In contrast to the preceding volume by McMillen, this is written for physicians and other professionals, as well as the layperson.

The Best Medicine, by Kurt Butler and Lynn Rayner, M.D. This is possibly the best comprehensive work on preventive medicine in print. It is the product of considerable experience and research. Some will disagree with it in minor areas but overall it is an excellent guide.

A Challenging Second Opinion, by John A. McDougall, M.D. The McDougall Plan, by John A. and Mary A. McDougall. These volumes are very valuable indeed as they set forth the essence of present-day knowledge on nutrition. They advocate a strictly vegetarian diet, and many readers may conclude that the way advised is too strenuous for them. But as McDougall points out, he is not offering an all-or-nothing plan. Benefits will be proportionate to application. The main criticism the books have received is that the amount of fat advised would be inadequate for very active people. However, McDougall's rebuttal of that criticism spread throughout his works is worthy of study.

The Pritikin Program of Diet and Exercise, by Nathan Pritikin, with Patrick M. McGrady. All of the Pritikin books are worthy of close attention. Very few men in the world have done as much research in nutrition as did Pritikin, and despite his critics, continued research validates many or most of his contentions. The criticism made against McDougall's works is also leveled at Pritikin – that his suggested allowance of fat intake is too low for active people. However, it should be kept in mind that his books are particularly written for people who already have severe atherosclerosis or other chronic serious conditions resulting from excessive use of fats and refined foods, etc. Live Longer Now, by J. N. Leonard, J. L. Hofer, and N. Pritikin, documents the same dietary approach.

Cured to Death, by Arabella Melville & Colin Johnson. This book may become the classic in its field. It will save many from premature death, as it warns against the excessive use of medical drugs.


Coping Successfully with Stress and Distress, and How to Survive Personal Tragedy, by Desmond Ford. These books summarize from science and Scripture the best that is known about the practical implications of psychosomatic medicine, nutrition, etc., as well as the Christian gospel.

Scientific American, Volume 229, Number 3, September 1973. Despite its date, this magazine issue is invaluable. Its theme is "Life and Death and Medicine" and almost all the modern issues except AIDS figure in its pages. The principles emphasized still apply in our decade.

Medical Nemesis (reprinted as Limits to Medicine), by Ivan Illich. This book, as with Confessions of a Medical Heretic, by Mendelsohn, is considered by many researchers to be extreme in its presentation. Nevertheless, medical book reviews have acknowledged that their criticisms of modern medicine are sometimes justified. Certainly Illich's work should be considered as a very thoroughly documented presentation of one important viewpoint. An Australian work, Medicine Out of Control, by R. Taylor, is also worthy of close attention. It influenced Stanford professor Robin in the writing of his book.

Health and Ways of Living, by Lisa F. Berkman, M.D., and Lester Breslow, M.D. This splendid account of the Alameda County Study which was a significant epidemiological achievement, was published by the Oxford University Press this decade and is worthy of close attention.

Vitality and Aging, by James F. Fries, M.D., and Lawrence M. Crapo, M.D. Here is an up-to-date study on longevity which has been thoroughly researched. Some of its conclusions may be overly optimistic but an invaluable book.


Hospital-Acquired Infection, by G. Ayliffe, B. J. Collins, L. J. Taylor. Written this decade, here is a thorough study of nosocomial disease. To understand what is written here could save many from unnecessary pain and premature death.

Hospital Infections, by J. V. Bennett and Philip S. Brachman. An invaluable book on nosocomial infections, etc.

Medical Care Can Be Dangerous to Your Health, by Eugene D. Robin, M.D. A "must." Written by a Stanford professor of medicine. Recommended by JAMA to all physicians as well as patients. Read and reread.
Take This Book to the Hospital with You, C. B. Inlander. Written this decade as a very practical guide to people who must enter one of the most dangerous places to be found in any city – the hospital. The section on nosocomial infections and iatrogenic disease alone would make it worthy of purchase.

The Life You Save, by Lewis Miller. Written at the close of the previous decade, this book is a guide to getting the best possible care from doctors, hospitals, and nursing homes.

Over the Counter Pills That Don't Work, by researchers working for the Public Citizen Health Research Group. Practical.

How to Stop Worrying and Start Living, by Dale Carnegie. This book is a classic in the field of psychosomatic medicine. It is full of practical help and many illustrations from life that send home its message. Carnegie was an eclectic writer, gathering materials from many sources and the reader has the benefit of a whole library when he reads a Carnegie volume. In terms of good health this is Carnegie's best.

The New Aerobics, by Kenneth H. Cooper, M.D. The Aerobics plan, formulated by Dr. Cooper, has made beneficial impact around the world. Even in far distant countries like Japan we find multitudes pursuing the aerobic way. Recently, before 6:00 a.m. in Manila, I watched hundreds of young people engaging in aerobics to begin the day. They poured enthusiastically down the main street, with one entire lane preserved for them, free from all motor vehicles. With gladness I have watched joggers in New Zealand, Australia, the Philippines, England, and other countries of earth, and always with gratitude to Dr. Cooper. While walking is the best all-around exercise, there's nothing that can beat jogging for those who are young and vigorous, and who cannot raise their pulse rate adequately by walking. Mrs. Cooper has also written a book for the ladies who wish to jog.

The American Way of Life Need Not Be Hazardous to Your Health, by John W. Farquhar, M.D. This volume is up-to-date with the latest in medical research, from the standpoint of preventive medicine. The author is the leader in the field, and is the founder and director of the Stanford Heart Disease Prevention Program which is attracting increasing national attention. If your way of living follows the American norm, this book could well save your life.

The People's Book of Medical Tests, by David S. Sobel, M.D., and Tom Ferguson, M.D. This book is a splendid volume explaining the nature of medical tests and their advantages and dangers. The book is very comprehensive and easy to read, and it is accurate. Read it before you have any projected medical tests if at all possible.

Maximum Lifespan, by Roy L. Walford, M.D. This is one of the modern classics on longevity. It contains practical hints on how to delay the coming of the grim reaper. The book was written for the layperson and contains much anecdotal and diversional material. Walford puts his major stress on diet and exercise.

Why You Don't Need Meat, by Peter Cox. This is a recent book, published by the chief executive of the Vegetarian Society of the United Kingdom. It is well documented and easy to read. Almost all recent researchers are agreed that vegetarianism is an ideal that should be approximated as closely as possible. The major reason why national and international statements do not give it its full place is because of the sorry condition of human nature, which is governed more by tradition and taste than by the facts of health. Few could read this book with an open mind without deciding that their intake of animal products should be reduced.

Everything You Always Wanted to Know About Nutrition, David Reuben, M.D. This book is eminently readable and practical. Its weakest portion is its discussion on cholesterol, which was written before the definitive studies, which climax'd with the reports in JAMA, in early 1984. But in many ways the book is preeminent among books on nutrition.

The Ministry of Healing, by Ellen G. White. This volume springs from the nineteenth century and is written from a Christian viewpoint. The writer was closely acquainted with Dr. John H. Kellogg, who was one of the greatest doctors of his time, and an informed nutritionist. The book reflects a high moral tone, reverence for the Scripture and the human body, and is full of practical counsels on how to live. The closing chapters on psychosomatic medicine, (though that term is never used within its pages) are invaluable, and so are the three chapters on nutrition, though completely devoid of technical terminology.

The Anatomy of an Illness, by Norman Cousins. This book, as well as the more recent The Healing Heart, will remain a classic in the health field. It has much that is splendid on psychosomatic medicine and particularly stresses the influence of the placebo. Drawing from his own experience, Cousins suggests that intravenous vitamin C may have a valuable part to play in emergency conditions. But his emphasis is upon the positive emotions and the simplifying of life-style. He particularly cautions against being too precipitous in pursuing modern technological medical approaches, though he respects all of these in their right place.

Doctors on Trial, by John Bradshaw, M.D. This is a very readable public indictment of today's medical system. It has the form of a court trial with medical professionals testifying. The arguments found in these pages reflect those of recent government reports, such as Lalonde's on the health of Canadians, the Shrivastava Commission on Health Care in India, and WHO studies as those by Dr. H. Mahler. The arguments of Bradshaw have been made by earlier well-known writers such as Ivan Illich, Rene Dubos, Archibald Cochrane, Thomas McKeown, John Powles, John MacDougall, Nathan Pritikin, and many others. The book is excellent.

Behavior, Health, and Lifestyle, by Brendan McGann. McGann believes with Illich and many others that "The health professions are on the brink of an unprecedented housecleaning campaign." He has much to say on the place of the placebo in modern medicine and of the principles of preventive medicine, particularly what he calls DARE – Diet, Activity, Relaxation, and Empathy. Published at the beginning of this decade, this author did not have the benefits of the recent cholesterol studies and his book suffers as a result. But the majority of the volume is well worthy of close attention.

Guide to Personal Health, by Jane Brody. A most valuable comprehensive work filled with wise and practical counsel.

The Role of Medicine: Dream, Mirage or Nemesis? by T. McKeown, M.D. This book is a classic and has had tremendous influence. Eminently readable, it shows clearly that hygienic measures rather than medical inventiveness did most to eradicate infectious diseases. See also Medical History and Medical Care, where McKeown is one of the two editors.
Crisis! Vols 1 & 2, by Desmond Ford. This is not a medical study, but a commentary on the Bible’s last book. It shows how the gospel of faith, hope, and love is mirrored in all the prophecies of Revelation. As God's plans for the future are shown and the glories of the gospel, motivation for right living in the here and now is evoked. This is a devotional, as well as an interpretive study, and will bring great joy and peace.

Kaleidoscope of Diamonds, Vols 1 & 2, by Desmond Ford. Volume 1 is written for unbelievers to bring them to faith in Christ; and Volume 2 is a devotional study of Calvary. Both volumes offer practical guidance for successfully encountering the problems of Christian life and witness in a skeptical world. The dynamic powers of faith, hope, and love, so vital for the discipline required for good health, are strongly evoked by these volumes.
**Select Bibliography**


Barnhart, R., *The Drug Industry*, Tufts University School of Medicine, Boston Student Health Organisation, 1970.


Erich, Harold; Crakes, James; and Clarke, Sam, *Living Longer and Better*, Mountain View, CA, 1978.


Kaufman, Joel; Rabinowitz-Dagi, Linda; Levin, Joan; McCarthy, Phyllis; Wolfe, Sidney; Bargmann, Eve; and Public Citizen Health Research Group, *Over the Counter Pills That Don't Work*, Washington, D.C., 1983.


