

## How to Avoid Appendicitis.

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Fifty years ago hardly anybody outside the medical profession had heard the word; to-day every peasant talks glibly about appendicitis!

What is the reason of this great change that has come over the people of England?

Some people will argue, like Dr. Cheinisse,\* that it is owing to the

greater knowledge possessed to-day, and that many cases of appendicitis existed previously but that they were not diagnosed.

This is admittedly true. Medical diagnosis is probably more exact to-day than it ever was, and therefore a considerable number of what were formerly looked upon as obscure abdominal pains and



symptoms, are now accurately classified under the head of appendicitis.

If however we leave out all these cases which would formerly have been put under some other head, it is generally acknowledged that the disease itself is enormously more prevalent to-day than it was a few decades ago.

What is the reason of this? If we look back at the changes that have taken place in the habits of the English people, and which would be most likely to cause this trouble, we are met, I think, with two very important things.

In the first place the enormous increase which has taken place in the sale and use of purgatives, both pharmacopoeial and quack, and in the second place the immensely increased use of flesh foods in the general dietary of the people. These, I think, are the factors which have had the greatest influence upon the alimentary canal.

At first sight it would appear as if these two causes were entirely separate, but a little thought will at once emphasize the fact that the use of this particular class of medicine is due to the effect of a changed dietary.

Appendicitis like many other novelties came to us from America—from America, the land of Chicago mysteries, and the home of quack medicines and personal self-drugging.

It is here then that I would lay down quite clearly the fact that flesh-eating as a habit is followed by constipation as a result, and by self drugging as a vice, and then by appendicitis as a penalty.

The beginning of the cycle of mischief lies in the diet. This wrong diet produces certain important modifications in the action of the intestinal walls and in their secretions and in their absorptions, with the result that symptoms are produced.

When these symptoms occur, the ordinary man in his folly flies to medicine, and especially to one or other of those powerful purgatives whose praises are lauded in every newspaper and upon every hoarding.

Instead of good he does harm. Instead of cure he only gets temporary relief. Instead of removing the cause he merely gets rid of the symptoms.

All this drugging has a most injurious effect on the intestinal walls, and instead of being normally healthy and thick and secretive and absorptive and bathed by constituents which are physiologically antiseptic in character, they become abnormally weakened and thinned and anæmic and unhealthy, and their contents are too often of so septic a character, that the only wonder is that appendicitis is not more prevalent than it is!

While, therefore, I most urgently warn against the evil of self-drugging and the habitual use of modern medicines and pills, and daintily packed up capsules and tablets, and attractively decorated bottles and enticingly labelled preparations, I would emphasize that these have only come into fashion owing to the increasing disease of constipation, and that, therefore, we must look more deeply than this for the real cause of appendicitis.

Everyone knows that the condition of the alimentary canal depends almost entirely on what we put into it. It is clear, then, that food is the factor which is of most importance to consider in discovering the cause of appendicitis and the method of preventing it.

With regard to food, we have to ask whether appendicitis is due to the food being irritating or to the food being septic?

In the early days before the subject of infection was understood, it was imagined that cherry stones and date stones and orange pips and fig seeds and similar indigestible substances were the cause of appendicitis, and foolish opponents of Fruitarianism thought that at last they had got an argument that was incontrovertible.

Fond wives warned their husbands against the danger of eating figs, and loving parents were in the throes of anxiety if their little boy swallowed a pip or a plumstone.

This is now entirely exploded, and no one with any pretension to scientific knowledge would venture to assert that fruit stones or seeds or pips had anything whatever to do with appendicitis.

Dr. Hawken, in his "Diseases of the Vermiform," very appositely points out that "Mechanical irritants do not cause peritonitis if they are absolutely free from micro-organisms—even powdered glass has no effect"—and he continues, "It is not improbable that subsequent observations may lead us to look upon all forms of appendicular peritonitis as owing their causation to bacterial infection."

Dr. Fowler, in his book on "Appendicitis," also sums up by saying "The conclusion is therefore irresistible that infection is not only the principal and necessary cause of appendicitis, but that it is the primary cause."

It is not from irritating but from infective foods that appendicitis arises.

Now what are these foods? The answer is well known to us all.

Flesh, fowl and fish not only rapidly decompose, but in the decomposition become a suitable soil for the multiplication of just those very micro-organisms which set up intestinal inflammation and abscess.

\* *La Semaine Medicale*, March 7th, 1906.

The colon bacillus which is present in all healthy intestines is a kindly useful agent when its surroundings are healthy, but if the contents of the intestines become purulent this gentle bacillus changes its nature, and not only where it penetrates the intestinal walls does it carry poison into the surrounding tissues, but where it collects in a blind pouch, like the appendix, with foetid contents, it becomes actively virulent.

It is not difficult to understand why dogs and cats and carnivorous animals escape appendicitis.

Nature knowing well the danger of retaining long in the body decomposing flesh, arranged for carnivorous animals to have exceedingly short intestines, so that by the time the flesh food is becoming decomposed it is at once evacuated from the body.

Alas for poor man. He has intermediately long intestines. Not so long as the herbivorae, because he does not get his food from straw and stalks which need prolonged and very prolonged intestinal digestion. Not so short as the carnivorae which rapidly get rid of a rapidly decomposing food, but half way between, because his food is fruits and nuts and cereals, which are concentrated in nourishment, but which contain sufficient cellulose to require intestinal digestion.

Mistaking his place in nature, man has been trying to eat more meat, and this has had to remain in his body long after its value was exhausted in the small intestine.

Passing into the caecum in the condition in which, in a dog, it would be ejected from the body, it has to remain in a man still longer, because it is mixed with cellulose bodies which need more digestion in the caecum and colon.

And it is just here that the appendix is situated and the dangerous disease is set up.

"Appendicitis is commonest between 20 and 30."\*  
Why? Because it is at this age that the appetite is the sharpest and more flesh food is begun to be eaten.

"Appendicitis is commoner in men than women."†  
Why? Men are far greater meat eaters than women.

"L'Appendicite," says Dr. Ch. Monod, "serait plus commune en Angleterre, en Amerique et en Allemagne qu'en France; dans les villes, que dans les Campagnes."  
Why?

Because more meat is eaten in America and England and Germany than in France, and because more meat is eaten in towns than in the country.

If we go into a stable or a cowhouse there is nothing offensive in the odours there, but if we go into a cat-house or the den of the carnivorae we have a striking lesson to our senses of the grievous changes towards the septic and the foetid which take place even in the short intestines of the carnivorae.

Dr. Chalmers Watson, writing on the subject of the increase of appendicitis, says:—"The most notable change in diet is the increase in the consumption of animal proteid food. I recently pointed out that the amount of imported meat had increased from 3lbs. per head per annum in 1850 to 50lbs. per head per annum in 1900. I venture to think that we have here the most important factor in the development of the disease. It is possible that the general and local nutrition of the tissues is modified by the continued indulgence in excess

\* About 70 per cent. of all the cases happen before the age of 30.

† About 78 per cent. are men and only about 22 per cent. are women.

of animal proteid, and that one of the modifications is the establishment of a local condition in the appendix and adjacent parts favourable to the pathogenic action of the normal intestinal bacteria. . . . I may add that in the course of an extensive experimental investigation on diet . . . I have found that the administration of an excessive meat diet is frequently followed by structural changes in the intestinal tract which are invariably most pronounced in the region of the caecum."

**Prevention  
better than  
Cure.**

What, then, is the great method of preventing appendicitis? I answer unhesitatingly that the greatest thing that I know to prevent appendicitis is the adoption of a carefully balanced fruitarian diet with plenty of fat and not too much proteid.

I have never yet come across a severe case of appendicitis among fruitarians, and have never found it necessary to operate on one.

The cases that I have seen among Fruitarians have been very few and have been very slight, and have in all cases tended to make a rapid recovery without any recurrence.

This latter point is of exceeding importance, for it is well known that with ordinary meat-eaters once appendicitis has occurred, it is almost sure to recur again and again until either operation or death ends its cycle.

With regard to general advice on diet to those who have a family tendency towards appendicitis, I would point out that milk should not be taken in large quantities at a time, and not at the same time as the pulses—like beans and peas—that the pulse tribe should be used sparingly. That uncooked nuts should be used sparingly. That concentrated proteid, like dried milk, under its many fancy names, should be avoided. That cream, butter, dried and fresh fruits, honey, green vegetables and salads should be used freely. That the teeth should be carefully seen to and mastication very carefully carried out.

And my conclusion is that with a correct fruitarian dietary correctly eaten, appendicitis is one of the diseases which should disappear from our midst.

**LEARN TO FORGET.**

Every night as the sun goes down let all the disagreeable happenings of the day slip out of your mind and sink into oblivion. Blot them out, annihilate them, and permit no resurrection. Go to sleep with the thought of pleasant things in your mind, and begin the next day as though it was the *first* day of all your life, the *last* day, the *only* day.

If anything disagreeable intrudes, at nightfall blot it out. Then if another day is given you make it better than the one before, remembering only the things that are lovely and lovable.

To forget—that is what we need. Just to forget. All the petty annoyances, all the vexing irritations, all the mean words, all the rankling acts, the deep wrongs, the bitter disappointments—just let them go, don't hang on to them.

Learn to forget. Make a study of it. Practice it. Become an expert at forgetting.

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