

TABLE AND FIBULÆ — TIME OF SOLID UNION IN DECADES.																						
Age	Weeks.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	18.	20.	21.	33.	38.	Total.
1-9 yrs.,	1-9	2	4	5	7	2	1	2														23
10-19	"			2	7	5	2	1	2													19
20-29	"		2	3	8	12	8	16	5	4	3		2	1	1	1		1			1	68
30-39	"		1	7	7	14	17	13	7	6	5	3	1	2	2	2			1			88
40-49	"			2	4	7	8	12	5	3	2	2	1	1	1	1		1	1	1		52
50-59	"			2	1	3	5	4	2	3	1	2		1	1	1	1					27
60-69	"				1	1		4	1	2		1										10
70-79	"				1	2		1	1													5
Total,	2	7	21	36	46	41	53	23	18	11	8	4	5	5	5	1	2	2	1	1		292

### HABIT CURE, MENTAL AND PHYSICAL.

BY JOHN WARREN ACHORN, M.D., BOSTON.

HERE is a commonsense problem for solution: A child at birth should have healthy automatic instincts, — for yelling, kicking, nursing. These come without rhyme or reason, unconsciously except for those who have to listen to them. A child apes those about him and soon gathers, during the formative years, a basketfull of habits, aside from involuntary practices. Later on other factors mix with the development and play a part in the evolution. Finally the child is made up of a batch of consciously or unconsciously acquired habits, mental and physical, good and bad, which he controls in part and in part surrenders to according to the understanding he has and the beginning character he possesses, depending mainly upon mother teachings. Equipped, then, according to instincts, temperament, inheritances, parents, playmates, surroundings and education, he graduates finally into the world's arena.

If the first thought-impulses that traverse the wilderness of a child's mind are disturbed by parental anger, nagging criticism or other discipline irrational in character, the chances are that distrust of self will develop in the child. An initial thought or impulse, like a trail through the wilderness, should be laid down as nearly right as possible. Thoughts, like explorers, are prone to follow a "blazed trail" instead of swamping out a new and better one, even if it is known to be poor. It is this spirit of nagging criticism, so prevalent in New England in past time, in the case of children, during the vital formative years, that is responsible for many failures and much unhappiness in mature minds even. Children can be taught the fundamentals, — honesty, love, loyalty, appreciation, reverence, patriotism, work and play, without being made the victims of a guilty conscience, — right or wrong, you're wrong, is one way of defining it. Praise of the right sort acts as a nerve tonic; it is constructive, while adverse criticism stunts growth and fosters morbid mental impulses. A child should never be nagged until the burden of his formative day, through worry, distrust or other cause, is dragged into the night. Every morning he should be taught to start afresh, and when the sun goes down, that day for him should end, — it is past experience. This way of doing might be practised by everybody; the night is a poor time in which to criticize one's self for the imperfections of a day that is done; it is a poor time in which to do business, properly the work of the day.

We are privileged to use past experience as a

guide to the future, but it is not to be looked back upon with regret. Looking backward fosters introspection and retrospection, both bad habits of mind; it fosters worry, the guilty conscience habit, and that of turning night into day, with consequent loss of nervous force from loss of sleep. If children, or any of us, for that matter, were made perfect in the beginning, we should have nothing in this world to do *really* worth working for. We should never willingly surrender any experiences of life; they make us what we finally become, a reflection of the best there is in us. Every expression line in our faces is an indication of self-building or self-denial in some direction, or should be. We are respected and loved by those about us as we grow older, because we have made a winning fight. The whole question is one of character building, or becoming one's own master, of finding one's self.

As the result of our training or lack of it most of us have come to be afflicted with physical and mental habits, which breed functional disorders, the persistence of which makes every-day life and living more or less of a nightmare.

For mental faults we have fear, false pride, over-sensitiveness, selfishness, envy, avarice, introspection, retrospection, obstinacy, loss of temper, jealousy, worry, hurry,—often due to procrastination,—hysteria and insomnia, along with many others. For physical faults, we have gross habits of eating, eating hurriedly, tea and coffee drinking to excess, neglect of regular bodily habits essential to health, neglect of sleep at the right time and in the right amount, surrendering to physical passions and desires known to be morally, if not physically, detrimental to health, or one's sense of well being, lack of cleanliness, alcoholism, the tobacco habit and many others. The one set has its habitat "above the ears," the other set "below the neck-tie," but they are one and the same thing, they are all habits or weaknesses due to our mental or moral make-up, vacillating or strong as the case may be, but they are all manageable or curable, provided the victim is not a degenerate, and has character enough to "nail to," or is willing to "hustle" for character. The cure is applied common sense simply, and the cultivation of one's power of resistance, until the mind and not the habit, whether mental habit or physical habit, is master.

Let us regard the thinking mind as a thin plate covering the floor of the brain just above the eyes. Above this plate worry, fear, anger, insomnia and the like have their habitat; they are

the "rowdies of the mind" in the attic of the brain, who, by their unruly actions, keep up such a disturbance that the better habits, peacefully disposed in the rooms about, cannot work to the best advantage to generate impulses or forces that are constructive, elevating, or spiritual. Below this mind plate are the body habits. We will locate them "below the necktie," for the sake of attaching them to the body itself. Gross eating, hurried eating, tobacco chewing, candy eating, liquor drinking to excess, physical negligence and immorality, belong to this class of body habits.

People who are mentally and physically miserable, but suffering from no organic or infectious disease, often know why they are miserable, but they seldom make an unaided attempt at a cure, — such is the hold habit has upon them; and they do not voluntarily confess the fault or the cause, either to themselves or another, unless invited to do so, as at a confessional. The first essential to the cure of any habit is a willing mind. Will any one admit he hasn't character enough developed, in the course of a lifetime, perhaps, to conquer a habit, if it detracts from his usefulness, his happiness, or the comfort of those with whom he lives? If the habit is mental, a "rowdy in the attic of the brain," the mind of the sufferer is to be turned up; or if the habit is one of indigestion due to beans eaten at bedtime by a man over seventy, the mind of the victim must be turned down. The habits of childhood are all abandoned, as the years go by, such as playing tag, sliding knee-fashion on a sled, one and all except the habit of eating. Candy eating, for instance, properly goes with quick digestion and the activities of childhood; it is often persisted in to old age, greatly to the physical detriment of the individual who declines to relinquish the habit. The food that digests well at twenty is not necessarily the food that fits best at sixty, and yet who interests himself to find this out? Food, like everything else, should be changed or modified with advancing years, to meet the physical needs incident to lessening activities, both physical and mental. We eat, or should eat, only what is required to keep the blood pure and bright, for the blood goes everywhere and nourishes all the tissues. When food is properly eaten, less is required and the stored-up nervous force is not wasted getting rid of it. The system relieved of this burden of excessive food saves an amount of energy equal possibly to that used by the brain in its daily round of work, while the increased amount of mental vigor that follows the use of food up to what is physiologically required, but not beyond it, is sufficient proof of the nervous force otherwise dissipated in this way. Proof of this is within the reach of every one who cares to demonstrate it. The extra strain imposed upon the human machine, from over-indulgence, must wear it out years ahead of its time. The assimilation of too much food renders the blood current impure; these impurities clog the connective tissues everywhere and cause many of those chronic disorders from which people of mature years suffer. The better assimilation of

properly masticated food, which is the first essential, in just the amount required, maintains the blood in its purity at its highest nutritional standard. Lust for food satisfies the baser instincts only. It stimulates sensuality, the inferior passions and desires, and robs man of his spirituality. Animal force in a flight of oratory may win the applause of the multitude, but never the hearts of the people. A mind "crowned" with over-eating may capture a city, but not the man at the head of the procession. If spirituality is one of the things needed in this world to offset its "splendid materialism," food properly eaten, thoroughly dissolved by the teeth and tongue before it is swallowed, is one way of gaining some of it. Plain living and high thinking work well under the same yoke. Perhaps the secret of longevity, sought for in fabled springs and patent elixirs, lies hidden in the proper utilization of our every-day foods, in marriage founded upon health as well as sentiment, coupled with moderation in all things.

Turning to the habit above the mind plate, let us discuss worry. Every one knows, or should know, that this is a form of nervousness, a mental condition and not a physical problem. It has no substance in fact and cannot be reached by drugs. The cultivation of a better habit is the only cure, and persistence in the attempt the only safeguard. There is no question but worry greatly impairs the physical well-being; it retards digestion and prevents natural sleep. During sleep is the only time when the nervous system is repaired; food when properly eaten and digested furnishes the material for repair. Yet worry or undue solicitude is classed below fear, which is defined as a painful emotion. Hypochondria is even more pitiful than worry; it is defined as "belief in a serious disease." The person who wills, wins; the person who *tries*, presupposes that he is going to fail. The *will* to do a thing has faith for a companion, while trying to do a thing has failure for a mate. It is good practice never to face a worry. If this worry is represented by some one in anger, turn on the heel and walk away; if it is in the mind, a happy thought, if possible, should be substituted for the ugly one. With practice this can be done. A happy experience, a fascinating story, a sentiment that appeals to the higher intellectual faculties, a short walk, the companionship of some one for a time whose moral courage fosters one's own, these and other resources within the reach of every individual, however humble, if cultivated, will serve as deliverers from this harpy or "rowdy of the mind," or any of the other habits mentioned, for that matter. At first breaking away from habit is difficult, because the mind doesn't respond to the feeble cry of the better impulse for recognition, the older habit being the stronger and much more readily started; but in the face of persistent patience the bad habit gradually weakens and finally the better one registers first on the dial of impulse, with sufficient force to maintain the balance of power, when the old habit, like a prairie coyote, slinks out of sight,

and wonder fingers entranced that such a weakness could ever have existed. These harpies of the mind often return to roost in their old accustomed places or on some other piece of mental bric-a-brac. Gun for them, persist in winging them, and in time they will all be bagged and the mind cleared; this is often a task, but it is a feasible one. However much these birds may fly over our heads we must not let them build nests in our hats. The thought that flits does no harm, the thought that sticks does harm.

All New England says, "he don't," instead of he doesn't. This is an error in grammar, a matter of habit. If any one having this fault of speech and desiring to be rid of it will say, "he doesn't"; twenty times a day, and get some friend to tell him when the "he don't's" are numerous, if he will repeat a sentence with "he doesn't" in it frequently, and put a printed "he doesn't" on a slip of paper, where he can see it on his desk, or in front of his dinner plate, after a time the "he doesn't" gets into the memory of the mind and the "he don't" gets out. Finally, the "he doesn't" in every sentence in which it should appear will be seen in advance of the "he don't"; as the words come romping along to form a sentence, the "he doesn't" takes its place and the fight is won. Oblivion settles over the old way, and grammar may be seen walking down the avenue of thought and expression on the right arm of memory, not on the left. This correction illustrates how one can make a new road, or better one, through the brain in place of the old trail so long used, since childhood probably.

A man suffering from insomnia will often establish this fact in his anatomy by sitting up regularly half the night; or, perhaps, about sunset he begins to say, "I can't sleep," and then keeps on vaccinating himself with this idea until saturated with it. Of course he knows he can't, he has been telling himself this for ten years, and he lies awake to prove it. Let him begin by saying, "I shall sleep"; let him say it forty times a day, — say it until the memory of "I can't sleep" fades and the affirmation "I shall sleep" takes its place. This comes about gradually, but finally the body of the person who *can* sleep, because he says he will, begins to relax, and impulses of a soothing, constructive character begin to travel the strained and dessicated nerves. Let the person suffering from insomnia go to bed early. He is not to try to sleep. Sleep always runs away if chased; it is another prairie coyote if ever there be one. Mark Twain once said "that the coyotes he chased looked like gray streaks going, and they left a hole in the air where they whipped through." The person afflicted should remain indifferent to the question of sleep, after retiring. Those who have faith can help themselves by asking God to help them, — he surely will. It is certainly a comfort to have some higher power to which to appeal. One man, cured, prayed to his wife; she had been dead two years, and he had suffered from insomnia fifteen years. He loved and idealized her more than anything else; he was told she was not far

away, that she simply had gone to join the Great Force that sent her here and had taken her away; if he prayed to her, he prayed to God who stood beside her listening. The influence of loved ones who have passed on never grows less with the living. The influence of every good mother is greater as her children, men and women, advanced in years, grow to appreciate the beauty of her life character. The only physical request made of this reluctant sleeper was, that he should take his every-day mind and hold his body still in bed with it, and not turn and twist as he had been accustomed to do; he was told that in time his mind would become positive instead of negative, and when his body relaxed, under the influence of affirmative auto-suggestion and positive memorization, with God's help, he would sleep. In six weeks he slept.

By various means and for various reasons, individuals will overcome any habit they decide to conquer, for all persons are not equally spiritual; but all seem to require some guiding purpose or inspiration. Love of children, faith in the advice of a friend, faith in the advice of a physician or of the minister, pride of the right sort, ambition, love of family, — these are the moving causes in many cases; then there is the desire to avoid sickness related to the persistence in some bad habit, or the desire with some to have nothing in their lives that might not be known, that might not be a universal law for all men to follow; and finally, and, best of all, there is the spiritual desire, by far the most potent, — for spirituality carries real faith with it and faith cures almost anything except organic and infectious diseases of a serious nature, while it goes far towards helping to heal some of these. One should cultivate his powers of resistance by any decent or ideal means until he has established right ways of thinking and acting in the place of wrong, and has such habits of body that both the mind and the body become healthy and remain so.

Concentration is one of the things required for the cure of any habit, as well as patient practice and a willing mind. Mental discipline or the ability to concentrate the faculties is what we should get in school or college; experience or real education is what we gain in the world at large. Concentration of mind is the thing that ails a fellow when he falls in love, and this form of concentration sometimes moves the admiration of the world. "Faint heart never won fair lady"; equally so, a faint determination never mastered an ugly habit. If the family man with a habit that is making the family miserable would put half as much concentration into curing his habit as he puts into some business problem, in order to make money that he really does not need and is too selfish to give away, he would soon conquer the habit and be, by so much, the better person. Social etiquette has reached such a fine point, under our modern way of doing things, that the members of the same family, living together, are bound to put up with each other's unwholesome habits, an etiquette which is a hindrance to happiness, when, if they had been

trained in a larger-minded way, they might help each other, and foster better feelings by promoting happiness in the home they share.

Old persons with obnoxious habits are prone to say they are too old to learn; what they should say is, they are too selfish to learn, or prefer to have those about them put up with their "little meannesses," rather than themselves make the effort necessary to wipe out their habits. Such persons are not masters of themselves and never have been. No greater small sin is committed than this petty sin, when one member of the family persists in some habit that works to the detriment of all the rest and persists not for a month but for a lifetime perhaps.

To sum up, then, this question of habit cure; first comes the resolution to do the thing required, then the memorization of an affirmative expression, because it is constructive and toning, a good substitute for the expression that is negative and destructive. This practice should be kept up till memory takes on the affirmative expression, and the negative fades away; and along with this goes concentration of mind or purpose; and finally one should seek any influence known that will assist, such as optimistic friends, reading that elevates, change of scene or thought, exercise or prayer, if one has faith.

Those who suddenly and successfully quit one habit for another are of the hysterical temperament usually and become readily "vaccinated" with a suggestion given them; they become intoxicated with an idea at once; perhaps they are fortunate in that they can be hypnotized promptly and remain so; who knows? For the majority of us the problem of life is quite like all other problems we have ever done; we have to chisel each in turn out of the solid rock of inexperience. It matters little how often one fails, if only his purpose to win is kept in sight; each relapse is less and less serious and the falls are further and further apart.

Competition, the basis of that endeavor by which the world forges ahead materially, develops many habits that balance those which spiritual teachings develop in us. *Competition* is the greatest mental *force* in existence. Against competition the feeble efforts of the world at character building may be compared to a child trying to wrestle with a giant.

With six days in the week devoted to competition and a little more than an hour in the one day that is left devoted to spirituality, delivered at arm's length usually, is it any wonder that many fail and fall as a result of the unequal mental training?

The acceptance of spiritual teachings depends, in part at least, upon the stage of evolution and the practices of each individual. Many men have not been through the coffee grinder often enough. This in itself is a factor from the point of view of evolution. The spark is there, it is in every one; it is everywhere; but the expression of it has not been cultivated, perhaps. Spirituality depends upon cultivation or practice quite as much as upon anything else. Practice makes a

good machinist, a good musician, perhaps a good Christian; patience and practice will cure any habit whatsoever, but habit-cure and Christianity represent different stages in human life from that held by the truly spiritual-minded. Christianity is a good habit; spirituality is something more. Christianity obtains when a man goes to church as a matter of liking or duty, or perhaps directs a Sunday school. He may be socially inclined, with organizing ability, enjoys recognition and takes a good job, for which there is pay in praise; or it may be he desires to help others gain an ascendancy that he himself cannot understand; this is certainly unselfish and so far as it goes is first class. Such an attitude carries a man above his habits usually, — at least, it should. Spiritual teachings will not always take root in soil where only tares in the shape of worry, anger, avarice or bad habits, whether physical or mental, have been growing. Peace of mind affords happiness for some, perhaps, but not happiness for others. The man who is clean up to his chin, who obeys the written laws, or more especially the unwritten social laws, if he has good health, something to do which he loves to do, and a hobby for the sake of recreation, usually has a good time in living, for he gets along comfortably; but these qualities do not constitute spirituality. The spiritual man is not satisfied with peace of mind, he must be in touch with God through faith. The mind rules the body; the spirit also must have help. One who has a spiritual nature can soon raise his powers of resistance to a high level and weld the link of faith in the chain of his life, so that it becomes as easy and comforting for him to talk with God as it is easy and helpful to talk with a dear friend, and more so.

A man must be taken in hand at that point in his education or evolution at which what is said to him will take root. People at the level of mere good citizenship do not all grasp higher teachings; individuals who indulge in mental practices that distract, or physical practices that debilitate, are poor absorbers of spiritual teachings. A man raised above his physical and mental habits is in a position to cultivate whatever tangible spirituality there is in him. One may gain faith because he has a spiritual side to his make-up, and yet be grievously at fault in his habits; this is probably the established order to-day with the majority of men. Too many people pray in one place and put their bad habits on exhibition in another. Those who have mastered their faults, by just this difference in level, are on a plane above that held by many who profess higher things, and their lives are perhaps more potent examples for good.

These worrying, nervous, threadbare people all about us, broken by the stress of modern civilization, are in need of just such relief as treatment and cure of their habits will afford. Their habits once mastered here, they themselves are better fitted for something higher, — for something far beyond and above Nature even, something so transcendent as to be quite beyond words; for something which profoundly influences life and

the spirit of man, for something compared with which all other things are weak and unprofitable. "For I have felt a Presence that disturbs me with the joy of elevated thoughts; a sense sublime of something far more deeply interfused, whose dwelling is the light of setting suns." May we so live that we may grow nearer this glorious Presence which so exalts the beauties of the world for us.

## Reports of Societies.

### AMERICAN ASSOCIATION OF GENITO-URINARY SURGEONS.

TWENTY-FIRST ANNUAL MEETING.

HELD AT WASHINGTON, D. C., MAY 7 TO 9, 1907.

(Concluded from No. 7, p. 230.)

#### A CASE OF ADENO-FIBROMA OF THE ANTERIOR WALL OF THE BLADDER.

DR. FRANCIS R. HAGNER, of Washington, D. C., presented this specimen. He said he had never seen a case like it before. L. R., aged sixty-eight, had suffered with prostatic obstruction, with increasing severity, for five years. There was one quart of residual urine. The prostate was small and firm. Several diverticula were seen in the bladder, and also a small stone. On doing a perineal prostatectomy the stone could not be removed, and the bladder was opened from above. On examining the anterior wall of the bladder with the finger a tumor was felt to the right of the median line, under the mucous membrane. The pathological report showed it to be an adeno-fibroma, showing probably a beginning carcinoma. The peculiar feature was the location of the tumor under the mucous membrane.

#### THE OPERATIVE TREATMENT OF TUMORS OF THE BLADDER

DR. LOUIS E. SCHMIDT, of Chicago, read this paper. An essential difference should be observed in dealing with benign and malignant tumors. The former should be approached from the inside of the bladder, the latter from the outside. In removing benign tumors two methods were used, the endo-vesical, by means of the cystoscope, and by suprapubic cystotomy. The first of these required special skill on the part of the operator, and would not become popular with general surgeons. In the second method, curved scissors should be used in removing the tumor, and ligatures placed as the tumor was removed. The common cause of failure in removing papillomata was because one large tumor was removed, while one or more smaller ones were left. The closed bladder should be suspended to the abdominal wall. In removing malignant tumors the tumor should first be located with the cystoscope, and then approached from the outside of the bladder through a suprapubic incision. The usual method of opening the bladder and hunting for the tumor was condemned. After making the incision, the prevesical fat should be stripped up so that the bladder would be exposed. A few guy-ropes should be fastened to the bladder. The entire bladder should be denuded of its surroundings. A flap of fatty tissue should be turned up over the exposed peritoneum to prevent infection. Any operation that did not remove more than one third of the bladder should be followed by closure of the viscus. A permanent catheter should not be used. The choice of anesthesia in these operations was of considerable importance. He used gas and had found that the patient urinated without the use of a perma-

nent catheter. He had had several cases in which more than two thirds of the bladder was removed, and in which the function was complete after operation. Cystoscopic examination would usually show whether the tumor was benign or malignant. Suspicious ones should be treated as malignant. The operation was justified in malignant cases if it gave only two or three years of comfort. Dr. Schmidt summarized as follows: All benign tumors should be approached from the inside. All malignant tumors should be approached from the outside of the bladder. In all cases in which the loss of substance is not too great the bladder should be completely sutured after the removal of the tumor. The use of the permanent catheter following operations on the bladder should be abolished. All bladders following operation should be kept under constant cystoscopic observation. Gas anesthesia should be used in bladder work.

#### ELECTION OF OFFICERS.

The following officers were elected: President, Dr. Harvey G. Mudd, of St. Louis; Vice-President, Dr. John van der Poel, of New York; Secretary, Dr. E. L. Keyes, Jr., of New York; Members of Council, Dr. Hugh H. Young, of Baltimore, and Dr. F. Tilden Brown, of New York.

#### THURSDAY, MAY 9, THIRD DAY.

#### JOINT SESSION OF THE AMERICAN ASSOCIATION OF GENITO-URINARY SURGEONS AND THE AMERICAN GYNCOLOGICAL SOCIETY.

#### SOME CONGENITAL VARIATIONS OF THE KIDNEYS AND URETERS, IN REFERENCE TO THEIR DEVELOPMENT AND SURGICAL IMPORTANCE.

DR. GEORGE S. HUNTINGTON, of New York, exhibited an interesting collection of lantern slides illustrating these conditions.

#### THE RADIOGRAPHIC DIAGNOSIS OF RENAL LESIONS.

DR. LEWIS GREGORY COLE, of New York, read this paper, and showed numerous lantern slides. He divided the rays into direct, indirect and secondary. With the indirect and secondary rays cut off it was possible to show not only the bony detail, but also muscles, fat, connective tissue and even the blood in the veins. With proper technique he believed any variety of renal, ureteral or vesical calculus of sufficient size to justify operation could be diagnosed. This statement was made after experimenting with the softest calculus that could be found. Enteroliths, osteoplaques, phleboliths and calcified glands often made a diagnosis difficult, particularly in the case of suspected ureteral calculus. Exploratory operation sometimes failed to find stones when they were actually present, or some were found and others left, and for these reasons he thought the x-ray was more reliable. Catheterization of the ureters was better in ureteral stones than in renal stones, but was not certain in either. A combination of catheterization with a stylet catheter and the x-ray was the best method of showing ureteral calculi, the pictures being made at different angles.

#### SPECIMENS AND ILLUSTRATIONS OF RENAL LITHIASIS, PYONEPHROTIC STONE KIDNEY, AND RENAL TUBERCULOSIS.

DR. CHARLES H. CHETWOOD, of New York, presented this collection of specimens and illustrations.

#### THE DIAGNOSIS AND TREATMENT OF CALCULI IN THE LOWER END OF THE URETER IN THE MALE.

DR. HUGH H. YOUNG, of Baltimore, said that a few years ago, while taking a trip through the West Indies