The Missionary's Call

My soul is not at rest. There comes a strange
And secret whisper to my spirit like a dream of
night,
That tells me I am on enchanted ground.
The voice of my departed Lord, "Go teach all na­
tions,"
Comes on the night air, and awakes mine ear.
Why live I here? The vows of God are on me,
And I may not stop to play with shadows,
Or pluck earthly flowers till I my work have done,
And rendered up account.

And I will go.
I may no longer doubt to give up friends, and idle
hopes,
And every tie that binds my heart to thee, My
Country.
Henceforth, then, it matters not if storm or sun­
shine
Be my earthly lot; bitter or sweet my cup;
I only pray, "God make me holy, and my spirit
nerve
For the stern hour of strife."
And when I come to stretch me for the last,
In unattended agony beneath the cocoa's shade,
It will be sweet that I have toiled for other worlds
than this.
And through ages of eternal years,
My spirit shall never repent
That toil and suffering once were mine below.

JUNE, 1908
Battle Creek, Michigan
The manufacturers of Listerine are proud of Listerine—because, it has proved one of the most successful formulae of modern pharmacy.

This measure of success has been largely due to the happy thought of securing a two-fold antiseptic effect in the one preparation, i.e., the antiseptic effect of the ozoniferous oils and ethers, and that of the mild, non-irritating boric acid radical of Listerine.

Pharmacal elegance, strict uniformity in constituents and methods of manufacture, together with a certain superiority in production of the most important volatile components, enable Listerine to easily excel all that legion of preparations said to be "something like Listerine", including the Liquor Antisepticus Compositus of the U. S. Pharmacopoeia, which is generally recognized as an undeclared tribute to Listerine.

The success of Listerine is based upon merit
The best advertisement of Listerine is—Listerine

Lambert Pharmacal Company
St. Louis, U. S. A.
A few years ago a little pamphlet was written bearing the title, "Our Suffering Sisters," and telling something of the truly awful condition of women in heathen and non-Christian lands. It was indeed a terrible revelation, the most terrible part being that its statements were perfectly true and from the lips or pens of direct eye witnesses of the things stated therein. The pamphlet was much used of God, and over twenty thousand copies were circulated.

In response to many requests for it, it is reprinted as a pamphlet and also in this issue of The Medical Missionary, in the hope that our Christian young women, especially, may be stirred to go to the help of these, their suffering sisters.

For many years we have known of and appreciated the good, and really great work done by Dr. and Mrs. Shepard at Aintab, Turkey.

It is very pleasing to note the fact of their recently observing the termination of a quarter of a century since their arrival on the field. The gathering was indeed a most remarkable one, comprising some three thousand persons inside the church and many hundreds crowded around the outside. Moreover, these comprised a number of creeds and nationalities, all come to do honor to the doctor and his wife who had done so much for them and the community.

And yet our friend, Dr. Shepard, was able to take all the honor thus worthily and enthusiastically bestowed upon him and his beloved wife with becoming humility, ascribing all of his success to God in the following becoming language:

"If one who did not know me had listened to what has been said about me during the last two hours, he would think that Dr. Shepard must be some great man; but you and I know that it is not so. A farmer's son, I grew up as an orphan. I finished school with great difficulty. I have not marked intellectual ability. Yet this great gathering on a busy week-day afternoon must have a reason. I know that this reason is not I myself. It is one greater than I am—God and his love. For one who knows how God loves men and how Jesus has saved us, not to tell others about that love is impossible."

And then he explains the reason and meaning of it all.

"Because I have understood a little of that love, I try to let others know about it. This is the purpose of my life. I did not come to this country to make money or to win a reputation. I came to bear witness to this, that God is love. And if by my work or life I have been able to show this to you, I have had my reward, and for it I thank God. The reason why the world has
not yet been set free from its ills and
diseases is not that the necessary medi­
cines have not yet been found. It is
that men do not love one another, and
that the rich are not willing to use their
money for the needs of the poor. I beg
and counsel you to know that God is
love, and to love one another in deed
and in truth."

How great the work done numerically
is shown by the following figures for
1907 of attendance at Aintab Hospital:
Daily average, 194; total for year,
58,543. Think of that! And men in
the United States waiting idly for pa­
tients to "turn up."

While there is general rejoicing
among missionaries and the various
missionary societies at the near pros­
pect of increased funds through the
Laymen's Missionary Movement and
kindred societies, it is well to note what
others are doing.

In a Chicago paper recently appeared
the announcement of a movement in the
Roman Catholic church to raise "A Mil­
lion for Missions." It was stated that
one man in New York had actually
given one-tenth of that sum, or $100,-
000. Think of it! Further, a move­
ment is on foot to raise $100,000 to es­
tablish and endow an institute and sem­
inary in the Philippine Islands in order
to train and educate a native ministry
there.

In the article by Dr. C. H. Finch,
of early days in China, the doctor tells
of the difficulty met with by himself in
regard to not being able to get the lan­
guage before being crowded with work
for the sick and suffering.

This has been the experience of many
medical missionaries, and some have had
to leave their fields and "drop every­
thing" in order to get away and master
the language. The position is indeed
very trying, and calls for much wisdom
and courage to know and do what is for
the best. Wisdom seems to dictate a
course which love and sympathy oppose.
Wherever practicable the new-comer
should be associated with a veteran
worker in a hospital for a time.

The article by Dr. Mary Ketríng
telling of the suffering of the poor
women in China, and written as recently
as April last, affords evidence that the
terrible things told in the article, "Our
Suffering Sisters," written some years
ago, is still applicable at this late date.
May many Christian young women hear
the voice of God in the cry and wail of
their suffering sisters, as they plead.
"Come over and help us."
The Medical Missionary College
stands ready to aid and train all such
volunteers.

Can any one look upon the picture
on another page of the poor African
women gathered around the body of
their dead chief, and note the expres­
sions of despair on those faces and not
be "moved with compassion," as Jesus
was when he looked upon the multitudes,
and wish to do something for these suf­
fering millions?

Or let any one read of those poor suf­
fering women in China as told by Dr.
Ketríng, and let them ask themselves if
they are doing all they can and ought for
them; because, if we are not so doing,
we surely are responsible for the exist­
ing state of things in proportion to our
neglect to try and remedy them.

Our best thanks are extended to
those of our brethren and sisters on the
field from whom we have heard, and
who have sent some accounts of their
work for God and humanity.

During succeeding issues articles will
appear in these pages and thus cheer be
brought to those at "the front" and "all
along the line," and information given
that will, as desired, bring other helpers
out to co-operate with those now on the
field.

If we could receive a brief account of
the work done by each, only once a year,
it would provide plenty of new and in­
teresting material for our pages, and
our brethren could tell of their individual
need of workers and means and might
secure both.
In sending the article and pictures of medical work in Siam, Dr. C. C. Walker kindly remarks: “I am glad that we are to hear from you once more, and this time through the columns of The Medical Missionary. I wish you great success, and trust that the paper will become a great exchange for helpful ideas and suggestions among medical missionaries.”

This is exactly what we desire it to be. Similar good wishes have been expressed by the more than sixty medical missionaries already heard from, for all of which we would say—Thank you.

WHAT THE KANDUNDU IS

Many persons would indeed be puzzled to understand or explain the meaning of the term, but Rev. T. W. Woodside, who, with his good wife and one of his daughters, has been at Battle Creek recently, explained it to a company gathered in the parlor. He said: “The Kandundu is perhaps the greatest fetish among this people. A piece of a special kind of wood is split in two. A little chamber is hollowed out into which the charm is placed, carefully wrapped and anointed. It may be a little house. A man is appointed as its attendant or priest. It would be sacrilegious for any one to speak against or meddle with it. It is consulted on various occasions, and whatever Kandundu commands must be done. If angry with an individual, it may cause him loss, or sickness, or death. In that case it must be appeased by a feast with beer drinking and dancing.”

“For this charm the man whose it was paid the witch doctors an ox, a slave, a fat pig, a gun, forty or fifty yards of cloth, a goat, and a chicken. Even at the current low prices of that country the price amounted to over one hundred dollars in our money; to them it would mean many times more. As wages are but ten cents or less a day, it means one thousand or more days' work. This charm was brought and given to me by the owner at one of the outstations a year ago in the presence of 822 people. He told where he had got it and what he had done with it. He said: 'I have no longer any faith in it; I have no further use for it. I want to accept the Word and become a follower of Jesus Christ.' The same day four other men brought, their charms and gave them up.

“Usually we build a fire and burn these surrendered charms in the presence of all. I asked the privilege of preserving this one to take with me to America to show the people. Its owner gladly consented. This little stick in itself, they admit, would do nothing,
but the Kandundu has been put into it by the witch doctor and dwells therein; hence its sacredness and power."

It was deeply interesting to look at and examine this strange thing for which a man was willing to do and give so much, and which in return never did or could bring him any good or deliver him from evil. But what an exchange to take the living, loving Saviour instead!

Mr. Woodside explained the weird scenes at a funeral. The body would be wrapped up as shown in the cut on another page, and after some days and nights spent in drinking, dancing, etc., the body would be taken to the place of burial.

Then two men would stand with the body tied to a pole resting upon one of each of their shoulders. Now the nearest relative would approach the body coaxingly with some chosen food in his hand and beg and pray of the corpse to tell who killed him or her. They would proceed to name one after another of those whom they might have reason to suspect, and beg of the dead one, "Do tell us, was it so and so?" If after an appeal the body seemed to move backward, it was a negative reply; if it moved forward, it was affirmative, and the relatives would go in search of the one named, or perhaps get the witch doctor to decide. Of course the sup-

MR. WOODSIDE, WIFE AND DAUGHTER, OF THE WEST CENTRAL AFRICAN MISSION

posed movement of the body would be caused by some movement of the men who held it in suspension, and who perhaps almost unconsciously would move in the direction of their suspicions.

But think of the wonderful change in all this when the Gospel is brought to and accepted by such people. No wonder their joy at such deliverance and change hardly knows any bounds. Like the man healed at the temple, they are ready, also, to take to "leaping and praising God."
BESIDE THE DEAD BODY OF AN AFRICAN CHIEF

The body is wrapped in the large bundle. Seated about are the wives and other relatives. The hopelessness depicted on every countenance contrasts pitifully with the joy of those who have become Christians.

(We are indebted to The Baptist Missionary Magazine for loan of the above cut and those on next two pages.)
To write an account that will describe to one who has not seen them the difficulties encountered in opening a new work in this country, is well nigh impossible, but let me enumerate a few of the more important that we are meeting. After acquiring some knowledge of the dialect and building a temporary dwelling (which my wife says "can not be termed a thing of beauty or a work of art," but is commodious, keeps out the fierce heat and most of the heavy rains) in which the only civilized materials used when first erected were a case of wire nails, eight pairs of strap hinges and some hoop iron off the cases and bales, the next difficulty was TO GIVE AN ADEQUATE REASON —to the native mind—for our being here. They said: "You are not administrators, you do not buy rubber. Then why have you come?" To tell them that we came to heal their bodies and tell them of salvation for their souls, is but to add mist to mystery, as disinterested benevolence is incomprehensive to the native. They therefore invented reason in harmony with their own mental and moral status. The almost universal conclusion is that we are ndoki, "devil's agents," buying or "eating" the souls of the people. The source of this is the singanga, "witch doctors," who are BITTER ANTAGONISTS FROM START TO FINISH. Therefore, whatever we purpose must be thwarted, good-naturedly if possible, but thwarted.

Touring through a new section, therefore, becomes a difficult exploration. When we wish to go to a certain place (if it be uncertain, so much the worse), we must be hindered or misled. If we take a guide, he will become the veriest stranger to the path we seek to traverse, or calmly show a wrong one, even though knowing that his perfidy will be manifest at the first village.

IF THIS PLAN OF DECEIT FAILS he will hurry along ahead and tell the people of the village to mislead us, after which any effort to bribe or coerce them into showing the right path is utterly futile. They will suggest two or three ways and swear to one or two, but never the right one. The principal reason for this is that to direct a stranger, especially a white man, to another's town is likely to precipitate palaver, and the informant and his town are held responsible for anything that may occur. When charged with hiding the path, we have had them volunteer to DRINK THE CUP OF POISON, which is the native method of trying a person for lying. If the concoction kills, that proves he lied; but it is made effective or otherwise, according to the will of the mixer.

Information is sought. You inquire
the name of the village or of the chief, or even of the person with whom you are speaking. He will answer you by asking, “The name of this village? The chief of this town? My name?” according to your question, and by the time you have assured him that that was what you asked, he will have thought of another than the right name to tell you.

YOU ASK FOR THE CHIEF

“He has gone to the next town or to the woods,” while sometimes you are certain that it is he himself that is giving you the information, and the mention of a gift for the chief would cause him to admit unblushingly he was lying.

A man or boy is sought to work, carry or act as guide; even with promise of liberal remuneration for his services. Straightway that person is the busiest fellow in the country, making the service asked impossible. The reason, doubtless, is that to be too intimate with us, or to possess much of our goods, would cause him to be suspected of bartering the souls of the people, for which he would be tried by the poison test, the dose of which the nganga would make sure was effective; or he would be sold as slave to another tribe. We have recently caused a boy, who had toured with us, to be returned, he having been sold to another tribe for a cow.

The sparse and scattered population, where there are no means of transportation, also makes evangelizing difficult. There is not only the lack of railroads, horses, elephants, oxen, burroes, rickshaws, steamers or houseboats, but even the despised hammock on the lower Congo is not available, as the natives here will not carry. So all travel must be done on foot, wading through sand, wet to the waist by heavy cold dews in the morning and later blistered by the hot sun. The Cuillo River is too swift for the canoe, as are all the large tributaries of the Kwango. On the latter only is the heavy dugout canoe of much service.
and then only in descending the river.  
A small motor boat would be of inestimable value.  
The absolute needs of the people aside of what they can produce for themselves are so insignificant that while they may covet what you have to offer, yet they can do without it.  For a man, two yards or more of cotton cloth, an old flintlock or cap gun and a little powder compass his needs.

**THE WOMAN’S DEMAND**

upon foreign manufacture is much less.  
One-fourth to one-third of a yard of the same cloth, with a few strings of beads, a hoe, and a little salt.  These are all that she must import.  All of these things they buy from native traders for rubber.  This, plus the native indolence, makes a bad combination.  The workmen frequently must spend days going from village to village, seeking food, and have often been on short rations, though probably this was not all lost time, nor without its advantage, for being Banza Manteke Christians, they witness for the truth as they go.

**THERE IS JUST ONE MAGIC WORD**

that can overcome everything and produce anything.—*mbisi*, “meat.”  At three different times within a few months, a buffalo has strayed too near us and has been transformed into beef.  Then the land of want became the land of plenty, and the hungry workmen pressed out once more the wrinkles in their stomachs, which were threatening to become chronic.  The natives here, unlike the lower Congoese, are

**AFRAID OF THE FIERCE BUFFALO,**

and hunt him only after climbing a tree or firing the grass and getting behind the flame for safety.

The people, while not unwilling to listen to the gospel, have no vital interest in it.  When the little audience gathered around the fire, with eyes steadily fastened upon you, are seemingly drinking in the precious truth you are trying to make clear to them, one who seemed most interested blasts your hopes by asking,

“**WHITE MAN, DID YOUR TEETH GROW**

with gold fillings?” or some such irrelevant question.  Or half the audience may suddenly desert you to play pirate on a chicken that had captured a large locust, which would be sauce for their *luku*, a thick porridge of manioc flour.

More than all this, and the cause of it, is the absolute moral darkness.  They know something of God (*Nhambi*), but he is to them only an enlargement of themselves, and so far removed or so indifferent to them that he need be neither feared nor propitiated.  There is no real sense of sin, and as yet we have found no word for happiness or joy in the dialect.  All is darkness, superstition and suspicion.  Anybody or anything may be a mortal enemy, or the avenue through which the enemy may approach.  The number and variety of the fetishes they have for protection is almost as numerous as there are possibilities of harm.

In one village we visited, they persisted in thinking I was *Nhambi*, and asked repeatedly that I send rain and make their fields fruitful.  Our vehement denial they construed as an effort to evade granting their request.

In a later letter we will try to tell how these difficulties are overcome.

**HOW SUNTATI WAS OPENED UP AT THE POINT OF A LANCET**

Extracts from the Diary of Dr. J. S. Derr, of the Sudan United Mission.

We were up at six this morning, and I proceeded to attend to the numerous duties awaiting me before leaving.  I worked hard all morning getting my loads ready and weighing them.  My carriers took their loads at 3:30—nine besides my two “boys.”  The loads were compact and neat, and I was glad to see them started at last.  Rev. Mr. Guinter walked with me to the gate and gave me a farewell handshake.  We arrived at the first watering place at about six o’clock, and I had hard work in getting my tent up before the storm came.  I had a little service for my men and they were soon talking about the fire which I could see from my tent door.  We broke camp at six the next morning, and after a dreary two days’ march through
the bush and tall grass over a road now slippery with mud, often obstructed by rocks and logs, drenched with rain, we arrived at Suntai. This is the town that a few years ago

RECEIVED CAPTAIN PARKER ON SPEAR POINTS

as he leaped down from the wall at the head of his men.

We proceeded at once to the house of the king, who gave me a cordial invitation to come in. I knew from Rowe that he was a good sort, and he is by far the most attractive personality I have met among his kind. He is a pagan king, not having accepted Mohammedanism. The leader of the expedition that finally took the town gave him his sword in memory of the gallant defense he had made. It was evident that the news of my medical work had reached him, and I only hoped he would not ask too much of me. I had a long talk with him, and told him what I came for. The next day, after the services with my boys and my own devotions, I called the king and talked with him until twelve o'clock, getting as much information as possible. I interested him with my compass, rifle, and medicine chest, allowing him to hear his own heart beat through the stethoscope. In the afternoon I went for a walk with him and then

TREATED SEVERAL PATIENTS.

The king himself went with me to see what I was told was a swollen thigh. I expected elephantiasis, but found instead a deep arrow wound. A deep incision failed to reach the seat of the trouble, and I poulticed it and left the patient comfortable. The next evening, accompanied by the king, I went again, and found it necessary to open the wound. I plunged a narrow lancet into the incision made the day before, and the effect was magical. Numerous exclamations of satisfaction were heard from the onlookers.

IT WAS A MOMENT OF TRIUMPH, and the joy and thankfulness of my heart filled my eyes with tears. A better thing could not have happened for the glory of God in this town.

I had great hopes for the king in the light of my conversation with him. He paid the greatest attention to all I said to him, giving me, when we came to his house, his own European chair and sitting on the ground himself. I told him as best I could of Christ, and that I had come simply to tell him and his people of him, which seemed greatly to affect him.

I was surprised and delighted to-night when he told me he wanted me to tell his people what I had been telling him. This is the time of the harvest festival, or Wakkan Suntai, celebrated by dancing and the beating of drums. This is held in the open space in front of the king’s house, by the light of the moon, bordered with thick shadow of the great trees.

THE SCENE WAS WILD AND WEIRD. The women with locked arms and rhythmic movement danced around the central group of men and drum beaters, chanting the wakka, which has been handed down by countless generations. A word from the king and a few of his Galadema (officers), and the whole crowd were seated in orderly fashion upon the ground, as still as the grave. I realized that what I was about to say would mark AN EPOCH IN THEIR HISTORY, and the thought thrilled me. What I said is immaterial, but my tongue was loosened, and I spoke more fluent Hausa than I ever did before. I received good attention, and the gratitude and pleasure expressed by the king was touching. He told me in the presence of his council that he wanted me to remain in his town, and I truly believe that he would do anything I advised.

SURELY GOD HAS OPENED UP SUNTAI at the point of my lancet, and I returned to my hut and gave him thanks. This has been, properly speaking, a good day.

[A day or two later we read again from this diary]: “I have had a specially pleasant time with my men to-night. They are spreading the Labarin Isa (gospel) throughout the town. Later in the evening I took the old king out under the big latai trees and had a
heart-to-heart talk with him. He has a simple, guileless heart, and I think he truly believes in Jesus Christ now. He does so at present, 

BECAUSE HE BELIEVES IN ME, 
and that I would not lie to him, but I trust and pray that before long it will be for a deeper reason, and that the Holy Spirit will speak to his soul.”

MEDICAL MISSIONS IN SIAM

Siam, unlike most Asiatic countries, is thinly populated. In China over the same number of square miles that comprise Siam you would find a population of more than 50,000,000 of people. While Siam has but 6,500,000 on her own territory. Siam has an unusually small population, a fact which has received the most careful attention of the Siamese government. As a rule the Siamese have large families, ranging from five to eight or more children. If you travel through the country, you will find the villages crowded with little children, but there are very few children between the ages of twelve and seventeen. Among the children at this age there is

A HIGH MORTALITY RATE.

I have noticed this again and again in my tours up country. Quick-spreading epidemics of smallpox, cholera, and plague carry the people away in large numbers. On the other hand, diseases like tuberculosis, malaria, and round worms, the opium habit and ignorance of proper feeding and care of infants, although slower in their work, nevertheless, carry a larger number away annually.

The government of Siam during the last three years has taken vigorous steps to stamp out smallpox. Free vaccine lymph has been sent to all parts of the country. In one of our recent tours we vaccinated sixteen thousand children free with government vaccine. We found there was very little difficulty in getting

THE PEOPLE TO COME TO US

for free vaccination. In one district over four hundred children were brought to us. This is the disease that carries away the older children every year. Many are stricken blind or are pocked and disfigured for life. The people believe in vaccination and appreciate the government's efforts to give free vaccination.

Two years ago, during the hot, dry season, cholera raged from one end of the land to the other. In the small town of Pittanulake over forty deaths occurred. In order to find drinking water, most of the principal towns and villages are situated along the water courses. In times of cholera epidemics

THESE RIVERS BECOME INFECTED

from the excrement of the cholera patients. The muddy river, which furnishes the only drinking water the people have during the dry season, is thus easily infected and becomes a source of great danger to the people.

The plague is met with mostly in and around Bangkok. Often it is brought to Bangkok by steamer from some other infected part of the East. Here we have to meet the same difficulty that they have in India. The people are often unwilling to co-operate with the police and health authorities in stamping out the disease. They object to having their sick ones removed to the isolation hospital and so

OFTEN CONCEAL THE PRESENCE OF THE DISEASE

from the authorities rather than have their sick ones removed from the house. Parts of Bangkok are so crowded and filthy that it is often with great difficulty that the disease is stamped out.

Tuberculosis, or the “White Plague,” thrives in Siam. In the city of Bangkok it is one of the most common diseases among the Siamese. In certain localities of Bangkok almost every other house has some member sick with consumption. It is met with among the princes as well as among the common people. The Siamese are not a robust people. In spite of the sunshine, tuberculosis gains many victims. The climate of Siam is very enervating. The principal food of the people consists of rice and fish, a diet hardly sufficient to develop a robust race.
MANY ARE TOTALLY IGNORANT
of the laws which make for cleanliness. Tuberculosis is far more common in Bangkok, where the above conditions obtain, than in the country.

Pernicious malaria is another enemy of the Siamese. Almost every extended visit to the jungle brings on an attack of fever. Sleeping on the ground in the jungle brings on fever. The mosquito is ever present. Mosquito nets are used by the natives as well as the foreigners.

In walking through the villages of Siam almost every batch of youngsters you meet with has one or more afflicted with round worms. You can easily detect them with their emaciated limbs and protruding abdomens. The round worm is one of the causes of the great infant mortality in Siam.

MANY COME FOR TREATMENT
while you pass through the country. Santonin and calomel have become a boon to this people.

Many of the men among the Siamese have taken to the smoking of opium. The Chinaman who is strong can more easily withstand the effects of this drug, but the Siamese, who is naturally weaker, soon falls a helpless victim to this drug. They lose all ambition and care only for their pipe.

Another cause of the great infant mortality in Siam is the universal ignorance among the women in regard to the proper feeding and care of the newborn. I have often seen INFANTS ONLY A DAY OLD
with kernels of rice in their mouth. In the country a common food for newly born babes is a paste made from boiled rice, bananas and coconuts. This is often fed them during the first month. Many an infant you will meet with whose little abdomen is as hard as a board from the solid food it has been compelled to eat. There is such gross ignorance prevalent among women and mothers of Siam that the government has issued a pamphlet in Siamese dealing with the proper care and feeding of infants, at the instigation of the medical missionaries.
MISSIONARY DEPARTMENT

GAMBLE MEMORIAL HOSPITAL,
CHUNGKING, CHINA

REPORT OF THE W. F. M. S. MEDICAL
WORK FOR THE FIRST QUARTER, 1908.

"Our hospital and dispensary give the best opportunity in Chungking of reaching women and children with the Gospel story. Nowhere else in the city do from fifty to one hundred or more women and children gather daily to sit for an hour or two listening to the old, old story, which is to them so new.

"NOWHERE ELSE IN THE CITY is there an institution where from thirty to forty-five women and children remain from a few days to a few weeks, as necessary, being, meanwhile, under systematic daily instruction in the 'way of life,' and being taught to read Christian books. The majority of the women who unite with our church have been converted through the evangelistic department of the medical work. Pray for us that His name may be more and more glorified, and the medical work be more and more blessed to

"THE SALVATION OF SOULS."

As to healing of bodies, Dr. Ketring reports as follows,—a grand combination of the twofold work of medical missions well blended together:

Attendances for three months ending March 31, 1908:

Hospital in-patients............ 123
Dispensary, first visits..........1175
Dispensary, return visits.......2298
Office-calls ..................... 113
Out-calls ........................ 40
Vaccinations .................. 14

Total .......................... 3,763

"A large number of operations have been done, involving, of course, an immense number of dressings and other surgical treatments. Nineteen of the out-calls have been to more or less difficult instrumental cases, of which I have written in previous reports.

"THE HOSPITAL HAS BEEN FULL ALL WINTER,
and overcrowded most of the month of March, although we have been turning away from one to five patients daily, who badly need ward or operative treatment. I know of nothing in China

"THAT SO WRINGS ONE'S HEART as to be obliged to turn away, day after day, those whose cure of some distressing disease or whose life depends upon being admitted to our hospital wards for a few days or weeks, and who are thus not only condemned to continued suffering, but who lose, perhaps, the only opportunity of a lifetime of hearing and of seeing the Gospel story lived, until they have learned the way of salvation.

"A word as to the

"TENDER MERCIES OF HEATHEN men. A few weeks ago a woman came to the dispensary with fluid and blood escaping from a ruptured eyeball. Upon inquiry she said some one had stolen three hundred cash (equal to fifteen cents) from her, and her husband was so angry with her for not taking better care of the money that he struck her eye. We asked her to enter the hospital for a few days, but although we sent him word of the urgent need, and offered to take her in free,

"HE WOULD NOT CONSENT.

"Another woman came about the same time with the end of one of her little fingers cut off nearly to the first joint. When we asked how it had happened, she said that her husband had accused her of being untrue to him, and would not believe her assurances of innocence, but said he would believe her if she would cut off one of her fingers. This she had done, but with tears streaming down her cheeks, she said,

"'HE DOESN'T BELIEVE ME NOW.'

A few days ago, still another woman came to the clinic with one of the middle fingers cut off close to the hand. I said, 'How did it happen?' 'My husband got angry and cut it off,' was the reply. Do you wonder that medical work among women is one of the greatest needs of China?

"Yours in His dear service,

"MARY KETRING."

It seems but right to add an explanatory word regarding the hospital Dr. Ketring has built and has charge
of. In response to her appeal for means to build a hospital the heart of a noble woman in Cincinnati was touched to give five thousand dollars or more to this object. It may be interesting to our readers, as it is to the writer, to state that the donor was Mrs. Gamble, wife of one of the partners of the Ivory soap firm of Proctor and Gamble. Why should not others be like wise by doing likewise in accordance with the Saviour's comment and command on the story of the Good Samaritan, "Go thou and do likewise."

It is particularly pleasant and encouraging to receive the above statement of the grand work being done by a former student of the I. M. M. Institute in New York, and who resided there while pursuing her studies at the Woman's Medical College, from which she was graduated. Dr. Ketring had already been a missionary in China for five or more years before she came to New York to study medicine, but from what she had seen of the suffering of her fellow-women especially, she determined not to return until she had become a physician and would thus be able to help these poor sufferers. Her testimony is quite up-to-date.

THE HIGHER PATRIOTISM

DR. W. L. WATKINSON

The missionary enterprise is the very salt of our civilization. Wherein lies our safety? In spiritual magnanimity. If you want to take care of your country, take care of your missions.

The guarantee of your splendor is your sacrifice. You keep your wealth as you give it away in noble causes. The tonic for luxury is the generosity that does and dares for the perishing.

If you want to keep your place with the topmost nations, you must do it by a tremendous stoop to those who are at the base.

If you want to put a ring of fire around the grandest civilization the world has ever seen, put a belt of mission stations around your empire.

MEDICAL MISSIONS AMONG MOSLEMS

Every writer on mission work among Moslems advocates the increase of medical missionaries. That the Arabian Mission is aware of their value is shown by the fact that eight of our nineteen missionaries are doctors or trained nurses. Begun on a very small scale by one of our first missionaries, not himself a doctor, it has abundantly proved its value, until fully qualified physicians, both men and women, are considered a necessity at all our stations. Beginning with the fittings of an old dispensary left behind by a retiring English doctor at Busrah,

THE VALUE OF OUR MEDICAL PLANT

now reaches into thousands of rupees. There was a time when any old downstairs store-room was thought good enough for a dispensary, while now we plan that our dwelling houses may be as cool and comfortable as our hospital building at Bahrein. Requiring ever-increasing appropriations for valuable medical outfits, friends have been raised up for us in a wonderful manner who have met this need.

In looking over our doctor's report we are struck by the gratifying increase in operations and in in-patients. It is these, made possible only by our hospitals, that afford us the opportunity of presenting Christian practice and theory, its doctrine and its fruit in such a way as to appeal most forcibly to the Moslem heart.

That our missionaries at both Busrah and Bahrein are taking advantage of these opportunities is shown by their story of much promising individual work done in the wards. We are also told of a better, or rather a socially higher, class of patients being attracted to our hospitals; men and women also coming from a longer distance to be relieved of pain and disability.

OVER TWENTY-TWO THOUSAND PATIENTS were treated during the year, all of them in the name of our Lord. Who can estimate the present and future effect upon the growth of Christ's Kingdom!
Among the special features of the past year's work should be mentioned our effort at Muscat. Mrs. Cantine has had a daily dispensary for women and children during the entire time and a gratifying growth in numbers and interest. In cases where the missionary's own experience is insufficient, help has been kindly given by the English doctor stationed here. Its value is not alone in itself, but also in preparing the ground for more fully qualified medical workers.—The Arabian Mission.

REMINISCENCES OF EARLY DAYS IN WEST CHINA

C. H. Finch, M. D.

When in February, 1893, a party consisting of four from America reached Suifu, the West China Baptist Mission took its second step forward. The station had been opened in 1889, and the early missionaries having been convinced of the desirability of opening work, had asked and obtained reinforcements; Mr. and Mrs. Wellwood of the China Inland Mission, then in Suifu, and our party being appointed at the same time.

With our advent the West China Mission began enlarging its borders, with more aggressive work among the women under Miss Inveen's leadership, more systematic work among the country villages by Mr. Wellwood, and definite medical work by the newly arrived doctor.

While other workers were allowed some time to acquire the language before beginning work, the doctor had to begin at once, with only the language of disease, which, having been learned once in one section of the globe, was equally applicable in any other. So before I had hardly time to make my bow to my new associates in my new and strange field of labor, I was

CALLED UPON TO USE MY SKILL

and knowledge of the knife in opening huge abscesses and performing a miracle of painless surgery by the use of a local anesthetic. Within a month of my arrival I had a dispensary in full operation, seeing some thirty or forty patients a day until I could do my own talking. My medical skill at reading disease was helped out by the missionaries, who acted as interpreters.

As our purpose in coming to China was not only to heal China's body, but also to save its soul, we prefaced all of our ministrations to the sick by a talk to them by both foreign and native preachers in the front room of our dispensary, and then the sick were allowed to come into the inner room, one at a time, where I could examine them and prescribe a remedy.

I was surprised at the confidence placed by the natives in the foreign doctor, willingly submitting to the knife or to the anesthetic, provided I would promise to cure. I needed to be careful, however, how I promised, or how I took any chances that might prove fatal, as the Chinese have a very uncomfortable way of

PULLING ONE'S HOUSE DOWN

or making one pay roundly for any such disastrous treatment. A man was brought in one day with both bones of one leg badly broken and the skin and flesh mangled. I could do no more than make him comfortable with a little morphine, and he died during the night on my premises. But for a city magistrate who had had dealings with the foreigners before, it would have gone hard with us.

One incident of the women's work was especially interesting. A young woman was brought in in the arms of her relatives with one side completely paralyzed. On examination I found it to be a case that could be helped and probably cured by a long electrical and massage treatment. It was

JUST THE KIND OF CASE THAT WOULD BE HELPFUL

for the women's work, for while I could not attend to it, I could and did so instruct Miss Forbes that she could visit the woman at her home every day or two and while giving her the needed
treatment could also converse with the women of the neighborhood who flocked to see and hear the foreign teacher.

With each year the number of our patients grew and our fame extended into the country, so that we began making medical trips to the nearer towns and villages.

We were always cordially received, and great numbers came to be healed. In many of these towns it was not safe for the women workers to go, as the Chinese prejudice did not recognize any good in women who were traveling without male escort.

Later, as the work developed and a few more dollars were given for medical work, I started a small hospital, crude and not up to date, but a place where I could have the care of a dozen patients. An opium refuge was also established, to help the large number of opium habitues who wished to quit the use of the drug.

In 1895, when the work was going along smoothly and we began to feel that we were really doing some good work, we were suddenly, within twenty-four hours, compelled to drop it all and run away, in order to save not only our own lives, but those of the natives associated with us, who would also have been imperiled by our stay. The provincial riot began in Chentu, where every mission building, Roman Catholic and Protestant, was utterly demolished. The missionaries were scattered, and hunted for hiding places like rats, getting into boats and coming down the river with the current when they could, or putting themselves under the dubious protection of the magistrates, who were not too anxious to protect them. The riot lost some force as it proceeded down the river, our own mission losses at Yachow and Kiating being less than those of the missions in the capital. In this riot no lives were lost, but nerves were well unstrung and some of the women missionaries were incapacitated for further work in China, especially one woman, who was separated from her two very young children all night, not knowing whether they were in the hands of friends or of the fiends then at work destroying their houses and property. As an example of what experiences work in a new country can bring, one woman might be mentioned who came to Chentu newly married to one who had been on the field some time. She arrived in Chentu the night before the riot broke out, and had not as yet opened the boxes containing her wedding presents or even seen many of them, when she was called upon to run for her life, and lost everything but the clothes she wore. Later, in 1900, in the Boxer uprising, she was visiting with us, her husband somewhere in that great province on his usual mission work, when we had to run for the coast; she could not stop to hear from him or let him know where she was. A few years later still, this same woman was called to hurry some five hundred miles in a small boat to the side of her husband who was desperately sick in a distant city, and was taken in childbirth on a small traveling boat by the side of the river, unable to reach any of the mission homes. This is but a mild sample of the many trials that came to some of the workers, although to others the way always seemed comparatively smooth.

Following the riot of 1895, after a stay of eight months in Shanghai and Japan, the missionaries returned to their fields and were received by the natives as cordially as if nothing had ever happened to mar the pleasant relations. Our return gave a new impetus to the mission work, and a number were soon added to the church of those who, having previously opposed the word, were now ready to accept it, having seen that we were willing to risk everything, even life, and so were impressed with the power of the gospel.

From that time the work crept slowly along, one or two being added to the
church at a time. The country, school and medical work were pushed or slackened according to the ability of the force, which was subject to considerable variations from sickness or leave of absence, or

FROM LACK OF FUNDS

to extend or even keep up the pace already set. Threats of complete extermination gave frequent alarms, as when a note posted on the outside gate would announce that on a certain date all the foreigners were to be killed or some other such pleasantry. Having learned, however, that threats were of no significance, the work was not halted for such things.

But with the Boxer uprising, the stampede of all the missionaries from their fields of labor, the persecution and heroism of hundreds of native Christians ended the period of the early days in West China. After an interval of a year began the present era, which I believe is to see wonderful things accomplished in that great empire.—The Baptist Missionary Magazine.

CHRISTMAS DAY IN TURKEY

DANIEL M. B. THOM, M. D.
Mardin, Eastern Turkey Mission.

"The Feast of the Birth," as it is called in Arabic, comes to us in the East twice in a year. European time is followed by the Catholics and Protestants, while the old communities, the Syrians, Armenians, Nestorians, etc., keep "old style," thirteen days later.

First comes a two weeks' fast; then a three days' feast. During the feast there is house to house visiting, where cigarettes are first passed, then candies of various kinds, and afterward, if the family is well to do, jellies and preserved fruits of some sort served on a beautiful tray of silver, flanked on each side by tumblers and spoon holders; the other is half filled with water. When passed to a guest he is expected to take a teaspoon, dip up what he can conveniently, put it into his mouth, and then place the used spoon in the tumbler in which is the water. This custom indicates that they have some notion of the microbe theory.

After the fruit has been served to all the guests, a plate of rahatelhalcoon is passed around, and each person is urged to take a piece. This is followed by black coffee without sugar, poured into tiny cups which are to be set on a silver cup holder to prevent the hot cup from burning the fingers. As one drinks the coffee he is expected to draw it in between his lips, making all the noise he can to show his appreciation of the cup.

By the time one party of callers has been served, another will have arrived; the first ones then pass out, leaving room for the newcomers, whereupon the whole procedure is repeated, and so it goes from morning until night. Many houses receive from three to four hundred callers on Christmas Day.

BETWEEN THE DAYS

Between the days—the weary days—
He drons the darkness and the dews;
Over tired eves his hands he lays,
A\d strength and hope and life renews.
Thank God for rest between the days!

Else who could bear the battle stress
Or who withstand the tempest's shock,
Who thread the weary wilderness
Among the pitfalls and the rocks,
Came not the night with folded flocks?
The white light scorches, and the plain
Stretches before us, parched with heat;
But, by and by, the fierce beams wane;
And lo! the nightfall cool and sweet,
With dews to bathe the aching feet!

For He remembereth our frame!
Even for this I render praise.
O, tender Master, slow to blame
The falterer on life's stony ways.
Abide with us—between the days!

—British Weekly.

Your anxiety does not empty to-morrow of its sorrow; but ah! it empties today of its strength. It does not make you escape the evil; it makes you unfit to cope with it if it comes.—Ian MacLaren.
MEDICAL MISSIONARIES HEARD FROM

It has been very pleasant and encouraging to hear from the following named medical missionaries, and to receive expressions of their good will and desire to co-operate with the editors in making this journal a means of intercommunication between themselves, and as a means of general information to the Christian young people of the country in our various Y. M. and Y. W. C. A.'s and colleges.

To all of those named we return thanks, even to those who have only sent a postal, while to others who have sent some accounts of their work, or have kindly promised to do so, we are especially grateful.

AFRICA: George Green Ogbomosoa.  
  "  L. H. Hertslet Excourt.  
  "  R. K. Shepherd Mombasa.  
  "  W. L. Thompson Rhodesia.  
  "  F. W. Wakefield Abokuta.

ARABIA: A. K. Bennett Busrah.  
  "  G. M. Pain Old Cairo.  
  "  W. H. Worrall Bahrein.  
  "  J. C. Young Aden.  

ASSAM: S. W. Rivenburg Kohima.

BRAZIL: H. S. Allen Lavras.

CHINA:  
  "  A. K. Baxter Chili.  
  "  Emily Brethhauer Hanyang.  
  "  F. F. Cattell Soochow.  
  "  F. W. Goddard Shao-sing.  
  "  E. H. Hart Wuht.  
  "  T. O. Hearn Shantung.  
  "  C. A. Huntley Hanyang.  
  "  Joe Keeler Hanyang.  
  "  J. F. Kelly Hoilow.  
  "  Mary Kettingh Chungking.  
  "  G. F. Mackenzie Kinhwa.  
  "  M. Mackenzie Foochow.  
  "  A. A. McFadden Hsuchantfu.  
  "  J. G. Mitchell Poklo.  
  "  T. H. Montgomery Amoy.  
  "  M. G. McNeill Manchuria.  
  "  J. A. Otte Amoy.  
  "  W. A. Park Soochow.  
  "  B. C. Patterson Suchien.  
  "  G. J. Stuckey Hsiao-chang.  
  "  Gertrude Taff Chinkiang.  
  "  W. A. Tatchell Hankow.  
  "  D. G. Vандeburgh Siangtau.  
  "  K. C. Woodhull Foochow.  
  "  G. McK. Young Harbin.

INDIA:  
  "  E. V. Hunter Belguam.  
  "  J. M. Macphail Bandah.  
  "  Dugald Revie Wardha. C. P.  
  "  G. Scott Bindishan.

JAPAN: Wallace Taylor Osaka.

KOREA: Rosetta Hall Pyeng-Yang.  
  "  W. O. Johnson Talku.


PERSIA: A. P. Packard Urumiah.

PHIL. ISLANDS:  
  "  P. H. J. Lerrigo Capiz.  
  "  Rebecca Parish Manila.

SIAM: C. W. Mason Chiang-mai.  
  "  C. C. Walker Bangkok.

SYRIA: D. W. Torrance Tiberias.


In U. S.:  
  "  S. Cochrane New Jersey.  
  "  C. O. Stumpf New York.  
  "  F. Van Allen New York.  
  "  A. H. Henderson New Jersey.  
  "  Ida Scudder New York.  
  "  A. M. Sharrocks California.  
  "  R. J. Dye Michigan.  
  "  Emily D. Smith Ohio.  
  "  H. N. McCandless Ohio.  
  "  Henrietta Grier New York.

MEDICAL MISSION NOTES

THE CHURCH MISSIONARY SOCIETY

The grand old C. M. S. leads the list of all the societies in the world with its number of medical missionaries, and a truly noble band they are. Some are struggling amidst great difficulties, overwhelmed with work and crippled for lack of funds.

Here are a couple of instances, taken from *Mercy and Truth*:

"Our reports from the Mount Kenia Medical Mission, East Africa, continue to be of a most encouraging character. Dr. Crawford frequently has an attendance of two hundred and fifty patients at the out-door dispensary, while the Sunday congregations average from three to four hundred. In his last letter he mentions that he and Mrs. Crawford had just returned from a three weeks' itineration trip, the results of which have more than ever convinced them of the utility of this method for reaching the great mass of the people. To enable him to do this still more effectively the Medical Committee have recently made Dr. Crawford a grant for the purchase of a traveling tent.

Through lack of funds it has not hitherto been possible to put up suitable buildings for the reception of in-patients, but a recent generous gift of £20, the exact amount asked for by Dr. Crawford, will now enable him to erect a small hospital sufficient.
Fancy erecting a hospital for one hundred dollars, and yet he rejoices to get even this.

Dr. Crawford wrote later as follows, and his words could be echoed doubtless by many another:

"It seems so hard to look out upon such a promising field of labor as this and to feel oneself limited on all sides for want of funds. However, we are full of faith that God can and will bless his own Word through us if we do our part faithfully, even if the funds are low. We shall try to adapt ourselves to altered conditions.

"The work keeps on well, and although the out-patients have not increased beyond two hundred and fifty a day the in-patients are increasing, and I shall soon have to build more huts to accommodate them."

This from a noble Christian woman worker, referring to whom the writer says:

Miss E. Forsythe, who is in charge of the dispensary at Mvumi, sent us an interesting account, a few weeks ago, of the work which is being carried on there. She was able to report an encouraging increase in the number of patients seeking treatment, and mentioned that the greater proportion came from places some distance away, and would in all probability never have come within sound of the gospel had they not been driven by sickness to the Mission. Her letter continues:

"We have a man here at present staying in an empty house in our village who has come from a place quite three hours away. He had a dispute with some of his neighbors and five of them had set on to him and beaten him until he was almost dead, as he said one day later 'I was dead when I came to you, but you have raised me up.' His friends came here to tell us about him, and we sent a hammock in which to bring him, as he was quite unable to walk or even stand. He is now almost well and able to walk to the dispensary every day, and he tells me that he does not intend to return to his village again, as he wishes to stay here.

"If only we had a hospital we could get lots of cases like this and get so many more under our influence, but having neither doctor nor hospital we are obliged to refuse them. It is so hard to have to send people away knowing quite well that in most cases it means agony for the poor creatures at the hands of their native doctors with no prospect of a cure; while we feel confident that with proper attention from a skilled practitioner numbers of them could be saved.

Even as it is, with our very limited knowledge of medicine, we are greatly cheered by the increase in the number of patients, as it is a sure indication that the people are beginning to lose faith in their native doctors, and if only the power of these men could be broken, one of the greatest hindrances to the spread of the gospel in these parts would be removed."

JUST BE GLAD

O heart of mine, we shouldn't worry so;
What we have missed of joy we couldn't have, you know.
What we've met of stormy pain,
And of sorrow's driving rain,
We can better meet again,
If it blow.
We have erred in that dark hour we have known,
When our tears fell like the showers, all alone;
Were not shine and shadow blent
As the gracious Master meant?
Let us temper our content
With his own.
For, we know, not every morrow can be sad;
So, forgetting all the sorrow we have had,
Let us fold away our fears,
And put by our foolish tears,
And through all the coming years
—James Whitcomb Riley.
OUR SUFFERING SISTERS
An Appeal to Christian Women on Behalf of Medical Missions

BY MRS. GEORGE D. DOWKONTT

Few women know, and fewer still realize, the terrible condition of physical suffering endured by millions of our sisters in heathen or non-Christian lands, owing to their lack of the advantages of medical science which we enjoy.

It is the purpose of the writer to place before her sisters some facts relating to this subject for their prayerful consideration, trusting that they may become interested in a work which should obtain their hearty sympathy and co-operation.

To many the contents of this pamphlet will come as a revelation, and perhaps a shock, but if the mere recital of these things pain us, and perhaps offend our sensibilities, what must it be to endure them?

All the statements, however, contained herein are from eye witnesses whose names are appended.

AN AWFUL EXPERIENCE

Miss Emma J. Cummings, M. D., a medical missionary in India, tells the following:

"I shall never forget—I wish I could—one experience that I had in India. I was called up at midnight to see a woman in the last stages of puerperal fever.

"I found her tossing and muttering in a delirium that ran into stupor and death. I did what I could to make her comfortable, bathing the hot skin, moistening the parched lips, etc.

"I then enquired if the child—born seven days before—was still living. One of the women answered indifferently, 'Yes, it's alive.' I asked where it was, and she replied, 'Oh, it's in there,' pointing to another room, 'but never mind it, it is nothing but a girl.'

"I went at once and found the poor little thing lying on a rough cord bedstead, with only one thickness of cloth under it.

"It had never been washed and for four days had not been fed, and its tiny bones were visible through the skin.

"Physician though I am, and used to sad sights of suffering, my eyes filled with tears as I took up the little skeleton. I did what I could to save it, but a merciful Father took the little soul to where it would be loved and developed, even though it had been 'only a girl,' and I thanked him that my efforts had been in vain.

"The mother died a few hours later, but I wonder, ladies, in your refined homes, if you can imagine the death scene?

"No sooner did they learn that death was near, than neighbors began to swarm in, until the miserable hut had twenty or more in it, all vieing with one another in groaning, shrieking, smiting their chests and screaming. In vain I told them that the noise was torture to her poor brain, as her head rolled from side to side. I could not keep them from throwing themselves, full weight, upon her chest, laboring hard to give her breath, and when I wanted to give her a few drops of medicine, but failed because her jaws were already set.

"I turned cold and faint to see her own mother strike her to compel her to swallow. I saw that I could do no good, and as the strain was too severe to be borne unnecessarily, I left, but the scene haunted me for months.

"Terrible things are done to the poor prospective mother. Many are mere children when they become mothers, and they are forced to stand during labor. In delayed delivery they are 'butted,' or a stout bamboo is laid across the body and manipulated by two persons to produce expulsion. In all cases the mother has no food for four days, and is then compelled to walk barefooted over cold stones to a bath.

"Do you wonder that so many commit suicide? May God, in his mercy, excite your pity for them. As you read these things, they suffer them, and will continue to do so unless we send them help."

TERRIBLE PRACTICES IN BURMA

Dr. Marie Cote, formerly of Rangoon, wrote: "My work here is mostly con-
fined to the obstetrical branch of medicine. When a patient is brought in, it is usually after having undergone terrible treatment at the hands of the native midwives.

"These mid-wives, having no knowledge of anatomy, believe it possible for the child to be born by the mouth. To prevent this a rope is tied around the waist and pulled by two adults, generally men, as soon as there is any labor pain. Then the poor creature lays herself on the floor of her hut, when the mid-wives stand on or trample her until expulsion takes place. It is a common experience for the whole uterus to be expelled also. I witnessed one such case, and then and there I promised my God that with his help I would do all in my power to alter this sad state of things."

THE HORRORS OF CHILDBIRTH IN SIAM

The following is told by Miss Hartwell, of Bangkok:

"One day my man-servant said, 'My wife is suffering very much and I want to take care of her.' I excused him, but followed him to his house.

'The woman's first-born child was two weeks old. She had been lying by a fire of hard wood coals. I found her burned to blisters from the breast to the pelvis in front, and one of the blisters on her back was as large as your two hands! Many of the blisters had broken and they had rubbed them full of dry lime and cummin.

'If you could see how these poor bedightened people suffer, you would wonder how any of them survive. As soon as the child is born, a pile of hard wood—neatly laid with the ends toward the edge of a plank—is ignited. The woman then lies down on this plank with no bed—not even a sheet under her—and exposes her naked abdomen to the heat. They think they will die if this is not done. With the first child the woman "MUST LIE BY THE FIRE THIRTY DAYS. The result is severe burns, which always cause acute suffering and sometimes death. This woman's skin looks just like the outside of a piece of roasted pork. It is simply beyond description."

And yet, though tongue fail to tell these things, our poor suffering sisters do not fail to feel and suffer them—and surely enough has been already told to touch, if not to melt, every Christian woman's heart, and lead her to action as well as earnest prayer, but still more remains to be told.

LUNATICS BURIED ALIVE

Mrs. Peoples, missionary in Siam, says:

"Two of the people became crazy, and as was their custom, they were tied up and as they grew no better, they were taken out and buried alive, in spite of their cries and pleadings. There are thousands upon thousands bound in such superstitions all around us. How much longer will they who know and enjoy the sweet liberty of God's children let them stumble and fall in the darkness?

"Why do not more come? If they knew what sweet green sheaves are to be gathered and how every missionary longs to treble himself or herself, more would surely come and help them and us."

A WONDERFUL CONTRAST

"Sickness at home means a nice, pretty room, kind nursing and dainty food. In India there is no bed, a windowless room, such as we use for a tool house, and no furniture whatever. The first I saw was like that, but had plenty of old chatties, jars used for cooking and storing. The invalid was squatting on the floor behind the door, propped up, not by pillows, but the mud walls of her hut."

THIS FROM ALASKA

Mrs. Eugene S. Willard, a missionary, writes from the Chilcat country:

"In all the native villages, back of the dwellings, there are little booths about four feet square and two or three feet high, some even less, built of pine boughs or pieces of bark, to which the women are banished during the birth of their children, and for ten days after. The weather may be bitterly cold, the snow piled above the miserable kennels, yet they must remain in them or be driven back under terrible threats.

"Last winter I saw these women digging an entrance to these holes through many feet of snow and crawl
into them as a dog would to his kennel.

"Could I give my sisters in Christian America one incident in its true light, or, rather, darkness, surely it would kindle in their hearts such a new and holy fire as would give out its bright blessings until these dark, dark hearths of Alaska should be changed into Christian homes."

Miss Harriet G. Brittain, from India, says—

"The poor child-mothers must retire to a miserable shed. In many cases the floor is of earth, a piece of wood for a pillow. Here their little ones enter life. Added to this compulsory banishment, with no love or tenderness around them, they must suffer in agony the cruel native treatment, which, in its refinement of torture, would blanch your cheeks, my sisters, even to read of."

**BEYOND TELLING**

The woes of the sick are thus described by Mrs. Isabella Bird Bishop, after spending nearly five years in visiting missions in heathen countries:

"The woe and sickness in un-Christianized lands are beyond telling, and I would ask my sisters to remember that these woes press most heavily upon women, who, in the seclusion of their homes, are exposed to nameless barbarities in the hour of the 'great pain and peril of childbirth,' and often perish miserably from most cruel treatment."

**HOW THEY SUFFER IN AFRICA**

The late Bishop Williams Taylor narrated the following:

"I saw a woman who had been accused of witchcraft, and condemned to death by ferocious ants. She was bound to an ant hill—often ten to fifteen feet high—and kept there all day. The cries of her infant were thus as to cause her release at night. The victim usually dies in two days, but this woman was bound and tortured for five days, and then driven away, because, as they said, 'She is too hard to kill.' She crawled in a terrible condition to the mission station, and the missionary told me she was the most pitiful sight he ever beheld. After careful nursing for months she recovered, and this woman, so terribly scarred and disfigured, was converted at my services.

"The recital of such scenes may seem terrible to civilized nerves, but how much more so is the endurance of them by millions of helpless human beings."

**HOW THE CHILDREN SUFFER**

When Dr. W. R. Summers, the first student of the I. M. M. Society, New York, was traveling in Central Africa, he came to a town where, as soon as it became known that he was "A White Man Doctor," two mothers came to him, each bringing a dead child, and beseeching him to do something. They had done the best they knew for the children they loved, and the mother love is world-wide, and efforts were visible on their scarred little bodies, which the mothers had scored with a sharp instrument from head to foot, in their dense, dense ignorance.

Surely, if we neglect to teach them better, are we not verily guilty of murder by neglect?

**MEASLES IN INDIA**

In a village in India an epidemic of measles broke out, and the native children died by scores. When the missionaries sought for the cause of so many fatal cases they found it in the practice of the natives to strip the children and hold them in the rain, for, said they, "The rain washes away the measles." So it did surely, as far as outward appearance went, but they could not understand why the rain "washed away" the children also. Poor creatures, with a mother's love in their hearts, they did the best they knew for their children, and any one, not being a doctor, could teach them better in five minutes.

**UP-TO-DATE FACTS**

Dr. Emilie Bretthauer, a former student of the I. M. M. Society in New York, landed in China in December, 1905, and in the first letter she says: "Since I have been here, only a few days, I have already seen some of the awful things which you detail in your pamphlet, and I am anxious to have our hospital so that I can relieve some of the sufferings of the women and dear little ones. There is no other medical work besides ours in the great city, so
what we can not do remains undone, and we do love these Chinese people, and are anxious to relieve their bodily sufferings and save their souls.”

Hanyang, via Han Kow.

THINK OF THIS CASE IN COREA

A mother lay dying. The native physician—so-called—had done all he could in accordance with his lack of any proper medical knowledge, and had said the patient would die unless one thing could be provided, and he made the horrible request that the hand of one of her children should be furnished him to make a broth for the mother, and a little girl of some ten years suffered the loss of her hand in consequence, not only on account of their terrible ignorance and cruelty, but because no one had gone there to teach them better things. How guilty are we?

IMPOSSIBLE TO IMAGINE

It would be utterly impossible for those in civilized lands to conceive of the terrible things practiced in the name or guise of medical treatment, and equally impossible for them to know, unless they are informed, and the responsibility lies upon those who know to make these things known to others. “We can not but speak the things that we have seen and heard.”

A woman medical missionary in India was called to a poor woman sufferer, and found that the native doctor had applied a large piece of red hot iron to the patient’s head, not only burning the hair off, but fearfully burning the scalp also.

And poor little children have been subjected to the same barbarous cruelty. It is hardly necessary to tell of the gratitude of these poor creatures toward those who come to them—especially their sisters—and teach them better, relieving their pains, curing their diseases, saving their lives, and also telling them of the Great Physician who gave his life’s blood to heal their sin-sick souls. Their cry and question so often is, “O, why did you not come sooner?” and one is reminded of the Master at the well at Sychar as he said, “If thou knewest—thou would’st have asked—and I would have given.” And how shall we meet Him and them by and by if we neglect our duty and leave them to perish?

THE LAYING ON OF HANDS

A young woman physician had just arrived at her station in India. The missionaries had been waiting for her several days, and rushed her off at once to a very sick woman—an Indian princess—who had suffered terribly for several days and nights.

The young doctor soon discovered the cause and with a skilful touch of sympathy she opened a large abscess and gave instant relief. Neither patient nor doctor could speak a word of the other’s language, but the doctor had shown her love by her act and as the poor sufferer placed her thin wasted hand on the shoulder of her benefactor, each understood the other, and the doctor said: “That was my ordination—that is when and where I received the ‘laying on of hands.’ ”

That young woman afterward became the wife and co-laborer of Bishop Thoburn, and last year, after some thirty years of noble service, went to that Home where the inhabitant shall never say, “I am sick.”

SHE GOT BETTER DIAMONDS BACK

The Queen of Sweden was so touched with Christian sympathy for the suffering women in her own land that she built a hospital for them, and in order to do so had to sell her diamonds. One day she was visiting a poor patient in the hospital, and as she sat by her a tear fell upon the gracious hand and glistened in the sunlight, and it came to her to feel and say, “Lord, thou hast not given me back my diamonds, but better ones.”

And now, my dear sister, you have read the testimony of these witnesses and their added appeals. What will you do? Can you not give yourself? If you say, “No, I can not,” and there are good and sufficient reasons for your refusal, then you can give your means to help prepare and send others who are able and willing to go, or help support those who can and do go.

Ask the Great Physician, as Paul did, “Lord, what will thou have me to do?” and follow the advice of his mother,
“Whatsoever He saith unto you, do it.”

I am pleased to tell you that something has been, and is being done, to send help to “Our Suffering Sisters,” by the aiding and training of young men and women to go out as medical missionaries.

In 1881, my husband, Dr. G. D. Dowkontt, founded the International Medical Missionary Society in New York City in order to help in the education of prospective medical missionaries. In 1884 the first two students of the society went to Africa, and since then over two hundred have gone to the various mission fields.

Owing to increase of the fees at the Medical Colleges in New York, and the withdrawal of reductions formerly allowed to missionaries by these colleges, a charter was asked for by the society for a medical missionary college in New York, and one was promised, contingent upon the possession of a large sum of money, which proved a barrier to its accomplishment.

Meanwhile, Dr. J. H. Kellogg, of the Battle Creek Sanitarium, had become interested in the cause of medical missions, and succeeded in obtaining a charter in Illinois for such a college, to be located in Chicago and known as the American Medical Missionary College. This institution, in addition to the facilities for actual medical mission work in Chicago, which it possesses for its students, affords them unusual opportunities for study at the large Sanitarium at Battle Creek.

Recently Dr. Dowkontt has joined Dr. Kellogg in furthering the Medical Missionary College, and in editing the monthly magazine, The Medical Missionary, which may be had for fifty cents a year. A catalogue of the college will be sent in reply to a request by postal.

In conclusion, I am glad to be able to state that provision now exists for the medical education for mission service of any earnest Christian young man or woman who may feel called to this work.

The total expense for board, rooming, books, fees, and incidentals can be met by about $250 a year, the entire course covering four years of study.

By rendering a few hours of service each week at the Sanitarium, students can earn their expenses, especially if they also work during vacations; and in cases where students, after earnest effort, are unable to meet all of their expenses, they may be aided as necessary.

The writer will be glad to hear, especially from any young woman ready to give herself to this service, or from those willing to give of their means to help others to prepare to respond to the call of their suffering sisters.

Battle Creek, Mich., May 1908.

The following is taken from a recent issue of The Missionary Herald, the organ of the A. B. C. F. M. or American Board, (Congregational). It seems to fit in well after the foregoing statement and appeal, and may help some one to decide:—

“We spoke in the last Herald of the way our recent candidates are stating their motive for volunteering. Here is one of the best statements we have received: ‘I have always had a dread of entering upon a life work which might pall on me before I was through, and in which my ideals might ever appear contemptible or unworthy of the best that is in me. I have been trying for a long time to discover a cause which would arouse in me the greatest amount of devotion, and would make life in its service more and more interesting to the very end. I have no longer any doubt whatever that such a cause is the advancement of the kingdom of God in the world. There is going to be something doing in this kingdom in my day, and I want to have a part in it.’

‘Remember, we want our candidates and prospective candidates to write us freely as to any difficulties or questions they have in mind.’

It is particularly a source of pleasure to one of the editors to hear from the former students of the I. M. M. Society in New York, and they will be pleased to hear of each other and rejoice together.
HOME DEPARTMENT

CUBA AS A MISSIONARY FIELD

The close of the Spanish-American War, ten years ago, resulted in a wonderful opportunity for Protestant missionary work in the “Gem of the Antilles,” the vast island of Cuba that lies in our very doorway. All through its history it had been held in the grip of Romanism, and thereby deprived of light and liberty. Darkness covered the land, and gross darkness the people. Bondage to Spain was so nearly identical with bondage to the papacy that when the Spanish power was broken, the Cuban also cast off the fetters of the Romish church, and for the moment stood ready to accept anything that was offered to him that was new, especially if it came from the hand of the American, whom he regarded as his benefactor. Protestantism was regarded as the state religion of America, as Catholicism was of Spain. The Cubans imagined that they had been transformed into Americans, and so concluded that conversion to Protestantism would follow as a matter of course. Nor were they unwilling to submit to the change.

Rev. A. R. Mosely, superintendent of the Baptist mission work in Eastern Cuba, who went into Santiago at the close of the war and assisted in averting the calamities of famine and pestilence which were preying upon the people, found them most ready to accept the gospel as he presented it. At that time it was supposed by the innocent Cubans that anything coming from America must be good, though the fallacy of this impression was soon revealed to them. Mr. Mosely states that at the preaching of the gospel people thronged to hear him by thousands, and at the first meeting where an opportunity was given for expressing the wish to unite with the church every man, woman, and child in the congregation rose to show this desire. But a long course of education was necessary to fit the people to comprehend in some measure the principles of the gospel and of common morality. Thirty-five churches have been organized by the Baptist society in the three eastern provinces of Cuba since the first church was established eight years ago, and the membership is over two thousand. Two colleges have been built and equipped—one for boys and one for girls.

Surely we do not need to go far away from our own shores to find places in the Master’s vineyard where the fields are white for the harvest. What is true of Cuba is equally true of all the Spanish-American countries. With the relinquishment of Cuba, Spanish dominion on the Western hemisphere came to a close. And when Spanish domination was swept away, a death blow was also given to the religious powers that have so long held those countries in mental, moral, and spiritual darkness. It is in our power to help our weak neighbors to rise into clearer light and better living, and certainly no other field calls for our sympathy, and no other field offers such inducements for our efforts as do the Spanish-American fields that lie at our very borders.

G. C. T.

A GREAT MISSIONARY PROBLEM AT HOME

No other portion of this world faces so grave a missionary problem to-day as that with which we in this fair country are brought face to face. What is to be done with and for the colored race? is one of the most serious questions of this or any other hour. In an article published in the Christian Observer and copied into other papers, Hon. Calvin Wells, of Jackson, Miss., gives his views of the question from the viewpoint of one reared and educated in the very midst of that region around which this question revolves. He was born and reared on a plantation where scores of slaves were held; he passed through the Civil War; and has since lived and taken his observations right on the spot where this great social problem centers. Of course he speaks for the educated class of white people, who have to meet the most serious aspects of this situation, a situation for which the present gener-
In the rising tide of Negro population the white people of the South see a very grave menace to their very existence. The thought of Negro domination in politics is simply unbearable. The disenfranchisement of the colored race is to them an absolutely necessary step in the defense of their liberties. The checking of the brutal instincts of a lazy, ignorant, vicious class of men by a force even more terrible than their own passions, seems to many of the people of the South a necessary step in the protection of their women. They also stand in constant dread and horror of the possible miscegenation of the two races, a calamity which, while it is deplored by the better sense of both parties, has no actual barrier except in popular prejudices, a barrier that does not afford secure protection in the presence of animal passions. These are matters of serious import, especially to a people who are in actual contact with the dangers that are involved, and which threaten every consideration that makes life desirable. They certainly call for our earnest consideration.

Mr. Wells does not fail to recognize the better and educated class of Negroes who are laboring earnestly for their own people, but claims that they form but a small portion of the colored race. The common Negro embraces ninety per cent of the race who are illiterate, degraded, and generally content in their helplessness. The writer referred to contends that the condition of the ordinary Negro has not been improved by what has been done for him since the war. On his plantation in bondage he was housed and cared for as he can not care for himself, and enjoyed privileges which he can not procure for himself, and in the exercise of personal freedom he has lost rather than gained in the mental and moral scale. This statement may be questioned, of course, but it comes so near the truth at least that it will pass for truth with many observers. So aggravated does the situation appear to this writer that he predicts that “if things go on in the future as they have gone in the past, before two decades there will be a war of races that will astonish the world. We stand on the brink of a volcano, which is likely to break forth at any time.”

Looking for a moment even at the other party in this growing struggle, we are touched with the sight of nine millions of people in a more terrible slavery than that which held their fathers as chattels. They are the slaves of ignorance and degrading propensities, living but little better than the “razor-backs” with whom they are often closely associated. These poor sheep are swayed by their preachers, who are generally as ignorant and as corrupt as themselves. The staff upon which they lean is but a broken reed. They are susceptible to the power of the gospel, and under its influence are transformed into living souls with high aspirations.

Mr. Wells contends that the mere education of the Negro does not benefit him. That will be accepted with modification, but it is as true of the Negro as of any one else, that nothing but the grace of God can make him over new and raise him above the level to which he has been thrust down.

The writer referred to makes a strong appeal that is rather unique as coming from a Southerner, and yet which will comend itself to good sense. He asks that the gospel may be preached to the colored people by educated and consecrated white preachers. He suggests that training-schools for the betterment of the colored preachers be started where they may receive instruction in the right principles of the gospel; and that religious literature of a class that will be helpful to the colored people be distributed among them. If it be possible to avert the conflict toward which we are certainly tending, and which must mean the practical destruction of one race or the other, and if the responsi-
ity of this matter rests with the Christian church, and since not only the temporal salvation of the two races, but the eternal salvation of the down-trodden race is involved, is it not true that a great responsibility is upon us for those within our own borders?

G. C. T.

SICKNESS IS NOT DIVINE PUNISHMENT

Through all ages the greater part of the human family has regarded physical suffering as a visitation of the displeasure of the overruling Power. From the lowest forms of heathenism up into the realms of Christianity this impression has prevailed. The incantations of medicine men and witch-doctors have for their object the exorcising of the evil spirits which are supposed to infest the persons of the sick. The malign gods of the more philosophical nations have been clothed with the power of inflicting the penalties of suffering upon those who have offended them. In all such regions religion consists almost entirely of acts that are intended to appease the wrath of those deities and ward off sickness and attendant calamities. Such an idea as this doubtless prevailed to considerable extent among the Jews, giving rise to the question among the disciples. “Who hath sinned—this man or his parents—that he should be born blind?”

And to a great extent this same idea manifests itself among Christians, that misfortune and adversity and suffering are visitations of divine wrath or displeasure. We are very apt to feel this way in our own cases especially, for it seems to be hard for many of us to believe that we are the objects of the love of God when we are afflicted.

That there is an intimate relation between sin and suffering there is no room to doubt. It does not require extended reasoning to form the connection between them as cause and effect. It is easy to prove that if there had been no sin, there would have been no suffering.

But there is a failure to discriminate between consequences and penalties. This distinction is plain and vital. It is an error to say that if we put our hand upon a hot stove, we shall suffer the penalty. The burn we would receive would be a consequence, and not a penalty. It would be the same whether we did it accidentally or purposely, whether we put our hand upon the stove or some one put it there for us. The man whose hand went to the stove would suffer, not the one who thrust his neighbor’s hand upon the stove.

“Whatsoever a man soweth, that shall he also reap,” is the fiat of cause and effect rather than of law and penalty. It is not claimed here that there is no moral offense in physical transgression. There is a large element of immorality in physical sin, but the physical consequences of bad physical living should not be mistaken for visitations of divine justice of the moral standard. They should rather be considered the inevitable results of violation of the laws of our being, which bear with them consequent suffering.

If, then, our suffering is brought upon us by our own course or comes to us as the result of the carelessness of some one else, or comes to us as incidental to this world of sin and death, is there any escape from those consequences? Yes; for the gospel of Christ is a complete remedy for sin in all its forms, and for both penalties and consequences. Mercy and restoration, pardon and healing, are all provided for in Jesus Christ.

It is not God’s wish that we should be sick. “Beloved, I wish above all things that thou mayest prosper and be in health, even as thy soul prospereth.” (3 John 2.) He does not take delight in our afflictions. “But though he cause grief, yet will he have compassion according to the multitude of his mercies. For he doth not afflict willingly, nor grieve the children of men.” (Lam. 3:32, 33.) “In all their affliction he was afflicted, and the angel of his presence saved them.” (Isa. 63:9.) Though sickness is often the result of folly, yet the Lord saves from the results of that folly. “Fools, because of their transgression, and because of their iniquities, are afflicted. Their soul abhorreth all manner of meat; and they draw near
unto the gates of death. Then they cry unto the Lord in their trouble, and he saveth them out of their distresses. He sent forth his word, and healed them, and delivered them from their destructions." Psalms 107:17-21.

Elihu, speaking of the case of a sick man, says: "His flesh is consumed away, that it can not be seen; and his bones that were not seen stick out. Yea, his soul draweth near unto the grave, and his life to the destroyers. If there be a messenger with him, an interpreter, one among a thousand, to show unto man his [God's] uprightness; then he is gracious unto him, and saith, Deliver him from going down to the pit: I have found a ransom. His flesh shall be fresher than a child's; he shall return to the days of his youth: he shall pray unto God, and he will be favorable unto him; and he shall see his face with joy: for he will render unto man his [God's] righteousness. He looketh upon men, and if any say, I have sinned, and perverted that which was right, and it profited me not; he will deliver his soul from going down into the pit, and his life shall see the light. Lo, all these things worketh God oftentimes with man, to bring back his soul from the pit, to be enlightened with the light of the living." Job 33:1-30.

This last scripture points out the lessons we may learn from sickness. It is a merciful warning of danger. The warning does not come too late, and if the traveler will but confess to God his wrong-doing, mend his ways, God will cancel his transgressions, recover to him the ground he has lost, redeem his life from the grave, forgive his sins, and heal his diseases. This, we are told, he often does.

He who forgives also heals: "Who forgiveth all thine iniquities, who healeth all thy diseases." (Ps. 103:3.) "I am the Lord that healeth thee." (Ex. 15:26.) Jesus bears our infirmities as well as our sins: "Himself took our infirmities, and bare our sickness." (Matt. 8:17.) And he is evermore the same: "Jesus Christ the same; yesterday, today, and forever."

Men and women bring sorrow and pain upon themselves by their unwise course in moral as well as physical life. We should be hopelessly lost but for the opportunity that is given us in the gospel for finding a ransom from death. A perfect gospel perfectly saves any imperfect man or woman, and this must be true in physical as well as in moral infirmities.

Sickness, then, is not to be regarded as a manifestation of divine anger, but as a merciful warning, an opportunity for us to return to right ways, to paths of peace and pleasantness. Our Heavenly Father is as willing and as able to grant us remission of the consequences of our physical sins as he is to remit the penalty that attaches to moral transgression. He can restore the wasted strength and renew the injured parts of our diseased bodies, but he asks for our co-operation. He wishes us to see wherein we have erred and to turn from our transgressions so that he can consistently bless us with long and happy lives.

G. C. T.

It is not well probably to count too much on uncertainties, and surely the presidential problem is at present an uncertainty, but there seems to be a fair prospect that the next President of the United States will be a special friend of foreign missions. This is because the two leading probable candidates, Mr. Taft and Mr. Bryan, have recently been brought into places where the practical working of missions has been under their personal observations, and since returning to this country both have expressed their great appreciation of missionary work as an uplifting power among the nations. On different occasions they have stated their convictions in favor of the great good that is being accomplished through Christian missions. While it is not desirable that our government should take any hand in the preaching of the gospel, it is well that those who have the direction of our national affairs should be in hearty sympathy with those who are carrying on the work of the gospel.
HYDROTHERAPY IN PNEUMONIA

People with gray hair are generally the ones most interested in pneumonia, for pneumonia is a disease from which they have much to dread. More people of sixty or seventy years of age are carried off by pneumonia than by any other malady.

With the young it is different. The chest can expand; even if one lung is rendered useless by pneumonia, the other can do the work of two, just as one young man can do the work of two for a short time in an emergency. But with the elderly person the ribs can not expand. The patient dies of suffocation.

What shall we do for pneumonia? This is a very important question. Here is a congested lung—an organ within the body that has too much blood in it and is invaded with germs. Now the blood is not destructive, nor is congestion a destructive condition. The germs are the destructive agents. The purpose of the blood is to destroy the germs. The lungs become passively congested, so that the blood does not move on. It goes into the lung, fills it up and stays there. The germs are outside of the blood vessels, in the tissues, attacking the lung.

Within the blood vessels are the white blood cells, which are constantly seeking out the germs and devouring them. Though apparently having no organs of sense, these cells seem to smell the germs from afar. They pursue the germs in an uncertain manner, pass through the walls of the blood vessels into the tissue, proceed directly to the spot where the germs lie, and immediately absorb them, actually devouring and digesting them. These little white cells are the policemen, if you please, swarming in to the affected parts from the distant parts of the body.

So, then, the thing that is necessary is to facilitate their work of cure. Nature is pursuing pneumonia germs to destroy them. That is the whole thing in fighting pneumonia—to kill the germs. As the blood goes down through the lungs, some of these cells pour out into the tissues to capture the germs. Take a drop of blood and examine it. These white cells will be found present in large number. Ordinarily there are only 7,500 in a drop, but the next day after one is taken with pneumonia there may be 25,000. The second day there may be 50,000, and the fourth day there may be 125,000 in a little drop where there were only 7,500 at first. In three or four days they are multiplied in the body until there are ten, or twenty, or even thirty times as many as four or five days before. Why? They have been multiplied. They have been created in the body to meet the emergency. What a wonderful thing that is! The same power that makes them made man. The same power made the first man and the first woman, the first tree, the first flower; and that same power is creating within us to-day. That is the only thing that saves us from death,—this process of creating all the while. That is the only way for the sick man to get well—to be re-created. We frequently hear persons say they are going out for a little “recreation,” but we do not always stop to think what that word means. It does not mean merely having pleasure. “Re-creation” means being made over anew, being re-created, and that is the whole process of getting well.

These little white blood cells get opposite the germ on the other side of the vessel wall, then pass through the wall, and are led by a marvelous intelligence right to the spot where they are needed. There they pounce down upon the germs and capture and destroy them.

The thing of importance, then, is to keep a stream of blood flowing through the lungs to prevent stagnation. When there is congestion, the patient gets blue in the face, the lips get blue, the patient is short of breath. Poisons accumulate in his blood—carbonic acid gas or carbon dioxide. The blood must be moved through the lungs faster. Right there is where the great power of hydrotherapy comes in, the power to control the circulation of the blood in the internal organs. The congested lungs are all
dilated and paralyzed by germ poisons, and full of blood. A compress made by wringing a towel out of cold water is put over the chest, and the patient gives a little shiver. His muscles contract. This makes the lung contract and causes him to take a long breath. The blood vessels contract and force the blood right along, just like the hand on the bulb of an atomizer. When the vessel walls contract, they send the blood along. The compress gradually gets warm and the vessels widen again. Then another cold compress is applied; the vessels again contract; they send the blood along again and more new blood comes flowing in.

A prominent doctor in Philadelphia has been treating pneumonia for the past ten years with the ice-bag. The cold compress is a great deal better than the ice-bag, but he uses the ice-bag. And by its use he has reduced mortality to half of one per cent in his cases of pneumonia. He has treated sixty or seventy people in succession for pneumonia without a single death.

Not very long ago a certain doctor examined the records of the Boston State Hospital, for the last sixty years, and summed up the results of the treatment of pneumonia in the State Hospital, Boston, Mass., and he found the mortality to be thirty per cent. Three hundred patients out of every thousand died. How many should have died? Not more than ten, or twenty, or thirty at the most. Two hundred and ninety or two hundred and seventy at least of these people ought to have been saved alive and doubtless might have been saved as well as not.

A lung compress half an inch thick and large enough to cover the entire front of the chest should also be employed in the treatment of pneumonia. The whole lung must be treated. For the back part of the lung a towel should be wrung out of real cold water, placed on the back, and covered with a mackintosh, which, in turn, is covered with...
The flannel should be large enough to go around the chest, and over the tops of the shoulders as well. If a flannel just suited to the case is not obtainable, there is nothing better than a pair of woolen drawers. The upper part will cover the chest, and the rest will go around over the shoulders, the two legs will go over the shoulders, cross behind, come around and pin in front. That is just the best kind of arrangement, and one can always find that kind of compress in the house.

The ice-bag is not so good as the cold compress, because it sometimes chills the patient. It does not get warm, but remains cold, and if kept very long on one spot, that part becomes numb. So long as the compress feels cold, it is doing good, but when the skin gets numb there is no reflex effect. But if the patient rolls about very much he keeps the ice-bag working around from one place to another, preventing numbness. The cold compress, however, is by far the best application.

Besides the cold compress to be put on the chest and changed often, there is the heating compress to be applied to the back. A heating compress is a towel rubbed with a towel dipped in cold water, and the legs wrapped with a towel wrung out of cold water, and covered with mackintosh and flannel. This is kept on three or four hours, or until the next pack. Wet packs on the legs should be kept warm. They must never be allowed to get cold a minute. If necessary hot bags must be placed around them. They must be put on cold—stockings wrung out of very cold water will do nicely—and allowed to warm up; then kept warm by a blanket wrapped around them. That will send the surface blood down to the legs. It is astonishing how the cough may be
relieved by these packs on the legs, and the compress on the chest. Should the patient suffer a great deal of pain, the heating compress, or cold compress, should be removed every hour and a fermentation applied over the painful part for about five minutes. That will give relief. Then the cold compress should be replaced.

After the temperature falls, the cold compresses are replaced by heating compresses, which are changed every three or four hours. Sometimes a lung becomes solid in pneumonia. The patient is given hot and cold three times a day in such cases; first just as hot a compress as the patient will stand for fifteen or twenty seconds, then very cold, with ice or an ice compress. These are alternated every fifteen seconds for fifteen or twenty times. A hot and cold spray is better still.

If the patient's temperature is high, a wet sheet pack should be given. The sheet must be wrung quite dry out of water at 60° or 70° and wrapped tightly around the patient. First it is wrapped clear around the body with the arms held up, then the arms are lowered to the sides, and the sheet goes around the arms. At the legs, one edge is tucked in around one leg, and the other edge around the other leg. The sheet must fit like a stocking everywhere from the neck clear down to the heels. Then the patient is wrapped up snugly with three or four blankets. In about ten or fifteen minutes he will be quite warm. He should be kept there for half an hour, or until well warmed up. If the temperature is very high, he will warm up in fifteen minutes or less. When the sheet becomes warm, it should be renewed.

If the patient shows a tendency to perspire, that is a most encouraging symptom. Let him sweat; that will bring the crisis of the disease, and from that moment he will be better. The temperature will drop, and recovery will be rapid.

ASSIMILATION OF IRON BY NURSING CHILDREN

Kransnogorsky (Jahrb. Kinderheilk., Vol. 64, 1906, p. 651, abs. in Experiment Station Record) showed by a number of experiments that the iron of woman’s milk was much better absorbed than that of goat’s milk, and iron in cooked milk better assimilated than in raw milk. The iron of spinach and egg yolk was assimilated to the extent of sixty per cent. Even the iron of certain commercial preparations was found to be assimilated, though to a much less degree than iron of mother’s milk, spinach, or egg yolk.

SINUSOIDAL CURRENT IN ATONIC DYSEPSIA

In a discussion of the treatment of functional dyspepsia, Robert Hutchinson (Proceedings of the Royal Society of Medicine, November, 1907) recommends the use of electricity in motor insufficiency, and states that undoubtedly the sinusoidal current is the best form to use. Herschell stated that electricity properly applied was one of the very few stimulants which it was known would act upon involuntary muscular fiber, and the current which was best was the sinusoidal.
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