

The Miracle of Milk:
How to Use the Milk Diet Scientifically at Home
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www.milk-diet.com

**Chapter IV: Preventing and Remedying Symptoms, Disturbances
and Mishaps during the Milk Diet**

The chief disturbance caused by milk, in using this food drink exclusively in the milk treatment, is brought about most generally by the difficulty of the weakened or otherwise abnormal stomach to take care of the curds and clots formed.

It may be said that the digestion of milk in the food tube differs from that of any other food because of its clotting. The clots formed in the stomach vary greatly, both in size and character.

Sometimes they remain in the fine flocculent or feathery masses; sometimes they shrink up into bullet-like lumps; sometimes they form great tough balls of curd that can hardly be regurgitated, or vomited, back through the oesophagus, the diameter is so great.

It is obvious that the finer and more flocculent the curd, the more readily the gastric juices can attack it and break up the albumin, carrying forward gastric digestion.

Many different methods and expedients, therefore, have been tried in the effort to keep the curds small and soft. And, though my experience has proven that most of these methods are unsatisfactory or even harmful, it may be of interest to the reader to know of them.

Some food authorities and dietitians advise diluting the milk with lime water, milk of magnesia, or some other alkali. This neutralizes the slight natural acidity of cow's milk, retards the formation of the curd for a longer time, and thereby favors the forming of softer and more flocculent curds. Others again favor the use of some sort of cereal dilution, such as thin, strained oatmeal gruel or barley water.

Still others suggest that the milk be boiled or that the fat content be reduced. Others advocate the use of some of the

peptogenic ferments to assist in peptonizing the milk and thereby render it more digestible.

A series of experiments made recently at the Jefferson Medical College on a human being who had the faculty of being able to regurgitate the content of his stomach at will has thrown a new light on these questions, although it is more than likely that they may require considerable verification before the conclusions arrived at will be finally accepted, especially when the milk diet treatment is considered.

Briefly, discarding the test tube and beaker, these experimenters found that milk drunk rapidly left the stomach sooner and produced a smaller curd mass than milk drunk slowly or “sipped.” This is quite as revolutionary as was the now admitted assertion that water drunk at meal time is not an unmixed evil, or that the “fletcherizing” of food fails to accomplish any marvels in digestion, but it is one idea that can never be adopted in the milk cure.

Again, it is learned that raw cow’s milk forms a large, hard curd, whereas boiled milk curds in a much finer and softer form; that the presence of much cream (milk fat) in the milk insures the formation of particularly soft curds which are slow to leave the stomach; that skimmed milk yields a particularly hard curd, owing to the absence of fat; that pasteurized milk shows smaller curds than the raw whole milk, but larger than the boiled whole milk, and finally that cold milk coagulates more slowly than warm milk.

Some of these finds had been previously known—some were rather revolutionary. The broad fact must be considered, however, that may apply to the digestion of milk in this one particular instance is no proof of its universal applicability. I should fear to adopt some of the suggested procedures when applying the exclusive milk diet.

Stomachs and digestive apparatus vary quite as much as do the owners of these digestive organs, and, in the final analysis, good judgment and personal experience will have to decide intimate questions of diet. But experience in thousands of cases has given me an opportunity to learn the many exceptions to a normal digestion of the milk and the most appropriate treatment in these

cases. Suffice it to say that, in this wide experience, I have found boiled milk totally unsatisfactory in all but rare cases, and that rapid drinking of milk is always detrimental when on an exclusive milk diet.

Nausea and Vomiting from the Milk Diet

Many people, on commencing the milk diet, become quite nauseated. The stomach rebels. This often results from trying to “wade” too quickly into the milk cure and is often entirely overcome if the full amount of milk is taken on schedule time from the very start of the treatment.

The “bad” stomach is often in such a condition that its so-called warnings may be very safely disregarded, for it doesn’t know what’s good for itself or the body for which it has to help prepare nourishment. It has misused and abused for so long that all it is will to do is to pass along some predigested material that doesn’t require any great expenditure of energy for it to get rid of and that may furnish only a small amount of vitality to the body anyhow.

It is well to give the stomach some real work to do, or something that will make rich, red blood and build strength and vitality into the system. After a few days of struggle the new circulation, filling the arteries and veins and bathing every cell in its nutrient juices, will stimulate the glands and the cells to produce their own digestive juices. Then the nausea and sickness will stop and all will be well.

A small percentage of people in taking the milk diet will have a nausea that is more or less disturbing, and that continuous drinking of straight milk will not correct. It is sometimes of a short duration, terminating automatically, but in some instances this condition steadily increases with each additional glass of milk taken until the individual is apt to discontinue the milk entirely, or until the nausea is increased to the point where it produces a vomiting of the stomach contents. Rarely is it necessary for these individuals to be disturbed in this way.

Sometimes it will be found that they have been taking milk too rich in butter fat, and merely skimming off all or most of the cream will allay the nausea. However, there is one simple remedy

that will prove effective in perhaps ninety-nine per cent of the cases. This remedy is lemon juice.

Lemon Juice an Effective Remedy

Some patients carry a lemon in a paper napkin so as to have it with them at all times. A small hole may be cut in one end, and after occasional glasses of milk, or after every glass if necessary, a few drops of lemon juice may be taken.

In some instances it may be taken immediately before the milk, but usually taking it directly after the milk will prove more effective.

A lemon may be cut in small sections, say into eighths, and one of these used after every glass of milk. It is better to take the juice directly from the lemon than to have the juice squeezed out and taken from a glass.

How much lemon juice will be required in any individual case is difficult to say. Sometimes as little as one-quarter of a lemon a day will be sufficient; on the other hand, one patient I recall required one lemon with each pint of milk taken, and as he took twelve pints daily, he was using twelve lemons. This is probably the largest amount that has ever been required.

Many people will not require lemon juice at all, but those who do will rarely require more than one or two lemons a day.

If, as may rarely happen, this does not allay the trouble, discontinue the milk and all food but hot water until the stomach is empty and a desire for milk is noticeable. Then, preparatory to beginning again, take a small amount of lemon juice, or one half hour before time for the milk take the juice of an orange or half a grapefruit.

After a few weeks of the treatment in at least seventy-five per cent of the cases there is apt to be a steadily increasing nausea or a condition where the milk is distasteful, and where this lack of desire for the milk can not be corrected by lemon juice, skimmed milk, or other simple procedures. In these cases, practically without exception, the body has made as much improvement as possible without further fasting or without a change of diet. This condition usually appears after five or six weeks of the diet. It

would usually be satisfactory to take a fast, the length of which will depend upon its effects, and to return again to the milk diet for further improvement. The system seems to be more eager for the milk on the second or following attempts or after a brief respite from the diet, and the improvement will then be more marked.

If for any reason this diet can not be continued longer than when this condition of dislike for the milk develops (usually after five to seven weeks of the diet), it will be well to return to solid food as described in Chapter V.

Those of the "bilious type," who have over-active livers and an excess of bile, occasionally have an uncontrollable vomiting—usually on the fast, if at all, but sometimes on the milk diet. This may begin at any time during the milk diet, but usually not for a few weeks after beginning. The milk should be discontinued promptly and a large amount of water taken. This may have the effect of carrying the contents of the stomach and upper intestines further down in the intestines and thus flushing the digestive tract. If it does not do this, it will dilute the bile and gastric secretions so that they will be easily expelled from the stomach and, at the same time, be less acrid and irritating.

This condition is usually brought on by too much cream; by taking the milk too cold; too large quantities at a time; or taking drinks too close together; or as a "healing crisis." It may continue for two, three or four days, but it is not apt to do this if the stomach is flushed immediately. The use of lemon juice here is also very valuable, either to allay the nausea and vomiting somewhat, or after the stomach has been emptied of all milk residue.

In some instances, especially in cases of kidney trouble, liver trouble, and prolapsus or dilation of the stomach, this nausea may be present only (or practically only) upon exertion or upon assuming the upright position. Consequently, merely resuming or assuming the reclining posture will allay the symptom. In some few other cases of stomach abnormality vomiting may occur only upon reclining, especially on the left side. Changing position or assuming the half-sitting, half reclining posture will usually correct this tendency.

In the summer-time if one is very hot (usually from undue exertion), or if one has been exercising, one may take the milk before sufficiently cooling, or too soon after the exertion, and may have a nausea and probably vomiting with or without severe gastric pains. Avoid this condition by being careful to have the system prepared for the milk when it is taken. But if you have been indiscreet in this manner, do not take the milk until the symptom has subsided, and hasten the relief by drinking hot water or using lemon juice, or both; and probably by the use of hot abdominal packs, if the trouble is considerable and obstinate.

Further Suggestions Regarding Lemon Juice

It is best always to begin the use of lemon immediately on the slightest indication of nausea. Do not wait until the condition is well developed. Take as many lemons as necessary, but as few as possible to correct the disturbance. If lemon appears to be too acid, an excellent plan is to mix orange and lemon juices, or grapefruit may be used in some few instances.

Have no fear of any harmful results from combining milk and acid fruits, regardless of theories and teachings along this line. In practically every case lemon can be used without fear of any trouble.

In rare instances, however, it is found that lemon itself will produce nausea. If it does, than sweet fruits such as dates, particularly, or figs, or raisins, and sometimes a small amount of honey, may prove satisfactory, but one should never take sugar, as the trouble will be aggravated by this. The need for sweet fruit and honey will be extremely rare, and when apparently required they must be taken in the smallest amount possible to accomplish their purpose.

Except in cases so rare that it might be safe to say, in no case, should any other articles of food be taken with the milk except fruit, and never even this unless for the purpose of correcting some unnatural condition. However, when using pasteurized milk, acid fruit juice should be taken in addition.

Sometimes the milk will be better taken care of if sucked through a straw with an opening so small that it may require an

effort to draw the milk into the mouth. This sucking method brings about a better mixing of the saliva with the milk and in some cases may aid in its digestion. At least the milk is more apt to enter the stomach in smaller amounts. But be sure to keep the milk well mixed by shaking or stirring, if this method is employed, so as not to have too rich milk toward the end of the bottle.

My own method, as previously stated, is to press my lips over the glass and make the opening so small that it is necessary to suck in the milk just as would a suckling baby.

At other times it is helpful to aerate the milk, pouring it from one glass into the other until there is a good froth on the surface of the milk. This prevents, to a certain degree, the rapid formation of hard curds.

Many doctors and food experts who look unfavorably upon milk as a curative diet have contended that the stomach rebels because it is constantly at work and that it needs a period of rest, which, of course, it does not get during the daytime when milk is taken regularly at half hour intervals. This is true in connection with the use of all ordinary foods, or even with milk itself, if taken in connection with other food. However, when there is nothing except milk (with fruit juices, when indicated, as mentioned) taken into the stomach, there is not, in my experience, any harm in adding more milk.

In fact, the partly digested milk acts as a “starter” for the new supply, combining with it perfectly. The practical experience of thousands of people who have taken milk in this manner, with the best of results, confirms this.

It might be mentioned here that practically all slight digestive troubles of the stomach that develop on the milk diet will almost invariably be corrected by the use of lemon juice. These troubles may be a fullness or bloating, more or less pain or distress, and acid regurgitation into the throat or mouth, a “turning against milk,” etc.

The Milk Diet and Constipation

Many people have taken and will take the milk diet for the correction of a chronic condition of constipation. Past experience

has shown that, while this diet is corrective, it is not so in the same way that drug laxatives, bran, oils, etc., are corrective. Instead it is corrective because of its normalizing and re-educative effects.

However, constipation is one of the symptoms that is apt to develop where the milk diet is taken, regardless of the original condition for which it is taken.

Many patients believe that when constipation develops on this diet they will fail to secure beneficial results otherwise, and that the constipation may be more or less permanent. If the diet has been prepared for, if it is taken properly, and if it is broken from correctly, no permanent constipation will be developed.

If laxatives of any nature have been taken previous to starting on the milk diet there will, of course, be a withdrawal of these stimulating agents. As is the case when formerly-used stimulants are avoided, there is a reaction toward lessened activity. If bran and such substances that secure effect through mechanical means have been used, the nerve endings have no such stimulants in milk residue to excite activity. If drug laxatives have been employed, the secretions and structures of the digestive canal are freed from the need of increased activity in order to expel these poisons from the system (which is the action secured to accomplish results with this form of laxative), and because they have already been over-stimulated their action will be materially lessened.

If oils have formerly been used, the milk diet leaves no similar lubricating material, and constipation may result. The intestinal activity may be so retarded, and the nerves of the lower colon and rectum so unresponsive to the milk stimulation given by the marble-like smoothness of the milk residue, that this residue is retained unduly long and until all the moisture has been absorbed. This frequently leaves the rectal contents exceptionally dry or very large. In either case this will delay bowel action.

To correct temporarily this trouble when on the milk diet the enema has proven by far the most valuable means. A pint of cool water is usually all that is necessary to stimulate the rectum to discharge its waste. It may be necessary to repeat this immediately. Avoid larger amounts if possible, as they will have a

tendency to dissolve the rectal contents, from which may be absorbed some toxic elements more or less harmful to the system.

In cases where exercise is permissible, walking, various abdominal movements, particularly the retraction of the abdomen, or massage, early in the morning or sometime after the last milk in the evening may prove effective. Or at these times “cannon ball” massage may be employed.

This latter massage is given by means of a croquet or similar ball rolled over the abdomen from the lower right-hand corner up to the ribs, across to the left side, down to the lower left-hand corner, and across to the starting point. One or more garments may be between the flesh and the ball.

If the milk diet is taken for some other condition than digestive—if there has been absolutely no disorder of the digestive tract—after the first three or four weeks of straight milk one may eat from four to six prunes, taking the amount once, twice, or three times daily if still constipated. These prunes should be soaked and not cooked. In a few such cases a small amount of figs may be used, but these have more of a tendency to produce gas and bloating; also they are more mechanically stimulating, and may cause more or less irritation.

In some instances of constipation and paradoxically, in other instances of diarrhea, agar-agar (Japanese Seaweed) may be used with benefit. I believe it would be best, however, to avoid the use of anything that has no definite food value. We rarely recommend sand for constipation.

Oils interfere with the digestion and absorption of milk and should not be used. In fact, some cases of constipation are corrected by removing some of the cream. In the majority of instances, however, whole milk will be better in cases of constipation unless there are contra-indications for its use, as given in Chapter II or Chapter IV.

In not a few cases, however, we have found that sumik or buttermilk taken according to the regular milk diet régime will re-establish normal bowel activity. It may be necessary to take only a few glasses a day of either of these, while using mainly the sweet milk; or either may be taken throughout the day or even throughout the milk diet régime.

In some other instances, taking the milk cooler or considerably warmer may be satisfactory, in which case usually only a glass or two of this milk of altered temperature may be required. If a very few glasses do not accomplish the result it will probably prove ineffective to take it in larger amounts.

If the use of one or two oranges a few minutes before the first milk in the morning, and the simple abdominal exercises and walking do not produce the desired correction of constipation, then resort to the enema, and do not fear to use it regularly—throughout the course of the milk diet if necessary.

Many cases of constipation developing on the milk diet, if not corrected by continuation of the diet, will disappear spontaneously when the regular diet is resumed. Do not return to this diet, however, unless results desired in other respects from the milk diet have been secured.

The best results in practically every case are more apt to be secured where the milk diet is taken “straight”—without the addition of anything solid; but, when necessary, with acid fruit juices, and always the enema when indicated.

Diarrhea Sometimes more Troublesome than Constipation

The opposite condition of bowel activity less frequently interferes when on the milk diet. However, diarrhea may develop and must be considered. Usually this should not be interfered with in any way for two or three days. It may be a necessary house-cleaning that will subside naturally by the end of this time. If not, and it is weakening in effect, steps may be taken to control it somewhat.

Skimmed milk rarely causes this condition, and should be the first method employed for its correction. If this is not effective, reducing the quantity of milk to one-half, or dispensing with the milk entirely until the diarrhea has subsided may be resorted to, and then the amount gradually increased while the intestinal tolerance is being carefully observed.

Sometimes diluting the milk with plain water, with lime water, or barley water may be used effectively. Use as small amount of

these waters as necessary. This may be one or two ounces or more to each eight-ounce glass of milk.

Also a teaspoon or more of malted milk, well dissolved into each glass of milk necessary, has been used satisfactorily. In this condition lowering the temperature of the milk has sometimes proved satisfactory. Rarely will increasing the temperature of the milk have the desired effect.

In the majority of cases, perhaps, maintaining the recumbent posture will be all that is necessary. In a considerable number of cases, however, this can not be followed strictly enough, and one of the other plans given may be necessary.

While sumik and buttermilk are usually more laxative in effect, it has sometimes been observed that they will check diarrhea. At least they may be tried if desired or necessary.

If no digestive or intestinal troubles existed before beginning the milk—if there is no particular irritation or weakness of the stomach or intestines—dates may be given usually with fully satisfactory results in cases of diarrhea, after a few weeks of the strict milk diet. From one to four dates may be used with each glass of milk, though the smallest number possible for effect should be used, and with as few glasses of milk during the day as possible for results.

Sometimes diarrhea will develop as a “healing crisis” after several weeks of the milk régime. In these cases, the fast is positively indicated and should continue until this symptom and any other that may have developed at the same time have subsided.

Why Old Painful Conditions Sometimes Return

It has been noted by many who have taken the milk treatment that painful conditions, such as rheumatism, headache, backache, skin eruptions, and sometimes a dull “stretching” pain in the kidneys, stomach, liver and other organs, and numerous old time symptoms seem to develop.

Occasionally there is a slight return of earache, or a pain at the seat of any old inflammatory process that has affected the lungs, the pleura, the intestinal wall, or the mucous membrane lining of

the generative organs, especially if there are any evidences of adhesions or stricture present.

In ovarian or uterine irritation, especially about the time of the menstrual flow, this pain is often quite pronounced.

I should like to impress strongly on the minds of those suffering from these symptoms that, while stopping the milk will relieve these pains, as a rule it would be better to “grin and bear it” for a while.

For the pain is merely an indication that Nature is active in building new capillaries and blood vessels in this old disused tissue, or that it is stretching out and strengthening fibrous tissues and sensitive coverings of organs or the peritoneal lining of the abdomen, and building new cells and putting new life into cells that have become partially atrophied by disease and more or less paralyzed in their functions.

It is really a condition of “growing pains” applied to local areas that are but transitory in their nature. The pain must be accepted only as an indication of physiological activity and repair in these areas.

When on the milk diet some few symptoms that are new to the patient may arise, but these are usually insignificant and occasion no alarm. But the old symptoms returning are apt to lead the patient to believe that the milk is causing a return of the very condition for which the milk is taken. In the healing process it is only natural to expect that, as the formerly diseased and abnormal structures are undergoing alteration, symptoms relative to them and symptoms which have been experienced before will become manifest.

An irritation of a certain nerve will produce a certain symptom or reaction, whether that irritation is of a depressive, inflammatory, or toxic nature, or in the process of stimulation to normal activity by a natural régime.

Drug doctors and surgeons know nothing of this “retracing of symptoms” or “healing crisis,” or “repair changes,” that are frequently met with in drugless treatment. For their methods of treatment are suppressive, and do not give the various abnormal organs, tissues and structures an opportunity to “retrace” from an

existing condition back through the different phases of abnormality to health and normal functioning.

The physical culture régime, and especially the milk diet régime, aids nature in establishing or re-establishing normal from abnormal conditions, and when these old symptoms reappear they should be welcomed rather than otherwise, as one can then feel that he is “back-tracking” over the route by which he arrived at his low state of health and his diseased condition.

So far as they may be responsible for or indicative of actual harmful effects, I can only repeat that, in an experience with hundreds upon hundreds of every conceivable sort of chronic trouble—from headache to syphilis—I have seen instances of the most remarkable improvement where these symptoms have been most severe, and that I have never seen any real damage or permanent harm done by the milk treatment. The only cases in which it might be actually dangerous to “push” the treatment are those cases associated with hemorrhage, or where there is a tendency toward apoplexy.

Temporary Increase of Catarrh

Some object to milk in diseases of a catarrhal nature, saying that it increases mucous discharge. It is true that such discharges increase in the beginning of the milk diet, but this is due to the increased circulation of blood to all parts of the body, and to the fact that the system is literally cleansing itself of waste matter; and when this is effected the catarrhal discharges will cease—not before.

When one has been feeding upon foods of an acid-forming nature, such as beef, bacon, eggs, white flour products, oatmeal, polished rice, etc., and the symptoms of an acid toxemia are present, milk will very quickly relieve the conditions, as it has an excess of basic or alkaline-forming elements.

Catarrh could never exist in any system if the normal eliminative organs were acting normally, or if while acting normally they could remove all of the toxic elements and excess waste materials that we are constantly taking into and producing in our systems.

Since the normal eliminative organs can not keep the body freed from undesirable elements, the mucous membrane is called into use to assist them, but this elimination is really vicarious—a substitute in case of need.

Catarrh is merely a house-cleaning effort on the part of the human economy, regardless of where the catarrh exists. This may be in the nose and throat, in the stomach, intestines, bladder, or wherever there is mucous membrane.

It is true that more or less severe chronic catarrhal conditions may develop, but that is not because catarrh itself is a disease—merely that waste elements have been formed in such abundance, and have been thrown out in such large amounts through the mucous membrane, that a low form of inflammation has developed.

As the milk diet is healing for any structure of the body, and as old symptoms are returned, or present symptoms temporarily aggravated, it is only natural to expect that catarrhal discharge, directly, an eliminative effort, will be increased.

Advice to the Consumptive

While from four to six weeks' treatment usually suffices for the relief or permanent cure of very many disorders, it is obvious that this happy result can not be hoped for so speedily in tuberculosis—as well as in several other diseases.

The treatment of tuberculosis is a campaign, not a battle, and must be fought out in some cases for years, instead of months, and in any case for many months.

Also, there are many contributing factors—such as climate, exercise and fresh air, freedom from anxiety and economic worries—that must be taken into consideration and planned for.

Also remember it is not wise to place too much importance upon mere increase in weight. The condition of the blood must be improved, and this vital fluid once more given the proper building power and resistance to disease processes. The progress of the lung condition (or the bone condition, in the case of tubercular spine or hip, or of whatever tissue or organ affected) will then be arrested, and the patient turned up-hill toward health and life.

Remember also that, almost invariably, there is temporarily when on the milk diet a considerable increase in the amount of expectoration. Often there is even a distressing increase in the cough itself. These symptoms, however, merely show a greater activity on the part of the lung cells in throwing off consolidated portions of the lung tissue which have been loosened up by the curative effects of the milk. It means that the air is entering more and more of the pulmonary cells which have hitherto been filled up with broken down products of the degenerative process.

Most generally the cough is easy and the expectoration is much more free—where formerly the cough was hard and racking and the material voided with extreme difficulty.

Later on, of course, both the cough and the expectoration are decreased, and air can be heard entering lung areas that were formerly quite consolidated.

I cannot emphasize too strongly the inestimable value of fresh air, day and night—and every day and every night—to anyone afflicted with tuberculosis.

Teeth Do Not Decay Because of the Milk Diet

It is frequently alleged that the exclusive milk diet tends to cause decay and softening of the teeth, the formation of cavities, the development of pyorrhea, and, occasionally, even the loss of one or more teeth.

This is perfectly absurd. For milk is extremely rich in lime and other mineral salts that go to build up tooth structure. It is, in fact, one of the best foods that could be taken by any one who wanted to secure the best possible nutriment for tooth and bone development.

However, a protracted fast, taken before beginning the milk treatment, may sometimes cause the appearance of cavities in the teeth. This is for the reason that when no food is taken, there may be a tendency on the part of the system to abstract the lime salts from the teeth, in order to maintain the normal alkalinity of the blood, or to provide the vital stimulating food for various of the ductless glands, which depend almost entirely upon the presence of calcium salts for stimulus to their normal functioning.

Or, some people may take but two or three quarts of milk a day—perhaps less than half of what they need to give them the full food requirements.

The solution of both these problems is simple. In the one instance it suggests that the period of fasting be limited to a day or two at most, particularly in the case of under-nourished, emaciated individuals, or that the fast be made a fruit fast. In the other case, that they go on a *full* milk diet—a glass of milk every half hour—every hour they are awake, up to twelve to fourteen hours.

This will prevent the loss of nutrient salts for the teeth, and the drain on the structure that results in the formation of cavities.

For the benefit of those who may entertain any doubt whatsoever on this subject, I would say that I have known many people who have been constantly under the care of their dentist for reparative work on their teeth, who, after inaugurating a course of diet in which ample supplies of milk were an integral part, never again had the slightest trouble with cavity formation in their teeth. And this for the reasons above stated.

Dilated stomach may require special modification in milk régime

Many have contended that the use of large quantities of fluid is necessarily contra-indicated where there already exists a dilated condition of the stomach.

The argument is advanced that in these cases the diet should be concentrated and of the lightest possible character.

In one way they are right. If you drink full quantities of milk, and remain at work or on the feet a greater part of the time, it will be quite impossible by this treatment to restore the stomach once more to its normal position and dimensions.

However, to prevent this contingency is comparatively simple. It merely requires that you should go to bed, or take a complete rest at least. If a full milk diet is taken, under conditions of perfect rest, there will be little or no difficulty in restoring tone to the weakened, relaxed walls of the stomach, and strengthening the muscles and supports of this organ so that it will once more return to its normal size and position.

Where this, the most satisfactory plan, is not possible to follow, then just sufficient milk should be taken to allow a very slow gain in weight without “overloading” the stomach. This amount will vary, naturally, and may be from three to five quarts daily. But it must not be forgotten that the *fast* is of tremendous importance in these cases. I have known dilated stomachs to be returned to normal by the fast alone. But the milk diet is usually necessary to maintain these good results, by supplying requisite reconstructive elements to blood and tissues.

Acute Diseases, Typhoid and Appendicitis

I believe in all acute conditions Nature demands perfect rest. Particularly in typhoid, appendicitis, or inflammation of the bowels, it is desirable that no food of any form whatever be given.

In chronic appendical conditions, or in chronic, sub-acute, or catarrhal inflammation of the bowels, the milk treatment has been particularly effective.

In chronic cases of cystitis there are usually thickened bladder walls and degenerated mucous linings which leave a bladder of relatively small capacity. This makes urination quite frequent even on an ordinary diet. For this reason this condition is not infrequently troublesome in the milk diet. Also, if there is much inflammation of the neck of the bladder, it is likely to be quite painful—an act that one would not care to perform any oftener than absolutely necessary.

Yet the chief reason for this pain in urinating is the presence of highly irritating ammoniacal urine, which causes distressing irritation when passing over the delicate and inflamed mucous surfaces at the neck of the bladder. When the amount of urine is increased several times, and the bladder symptoms remain practically the same, it necessarily takes considerable courage and determination to persist in the milk course.

Yet if one who suffers from bladder trouble will but persist in the treatment, it is perfectly astounding how rapidly the highly irritating, scalding urine changes in character to a bland, soothing fluid, free from fetid, decomposing odor, that tends to relieve the

lining membrane by its “softness” and freedom from all irritating elements.

This same solvent effect is exercised in the presence of stone in the bladder or kidney, or in ordinary conditions of gravel. There are very few of these cases in which an astonishing degree of improvement is not manifested after a few weeks of conscientious treatment.

Milk and the kidneys

It is generally taught by the medical profession that in kidney disease the quantity of fluid should be greatly restricted, “to give the kidney cells a rest.”

Experience in hundreds of cases proves this dictum wrong, and even medical doctors are realizing this more and more. For the excessive amount of fluid voided by the kidneys stimulates the organs to resume their natural function—which is to strain out poisons from the blood, and eliminate them from the system.

The urine of even the healthiest people is waste material, and injurious to health unless normally eliminated from the system. Where the kidney cells are damaged and the function of straining these poisons from the blood is inadequately performed, the skin and the bowels are obliged to work beyond their physiological powers.

Where the urine is vastly increased in amount, the toxic material and the waste matter are greatly diluted by the additional amount of water, and most generally a larger total amount of solids is excreted in the urine. This makes elimination easier, and it also tends to purify the blood more rapidly, and thereby remove from the system the chief predisposing cause of the trouble—retained toxic material.

And right here I may say that “floating” or prolapsed kidneys are almost invariably benefited by a milk course. Persistent treatment, maintained for a period of a month or six weeks, will usually restore them to their normal condition.

Kidneys lose their anchorage because of a reduction of their supporting omental (peritoneal or abdominal) fat. Strains, jars, twists and turns, etc., may be the exciting cause of a prolapsus of

these organs, but such would be ineffective were it not for the weakening or reduction of supporting tissue. The milk diet supplies cells to any tissue according to the nature and demands of that tissue. When fat is deficient, then through the nourishment by the milk diet fat cells are formed, and in this instance a normal support of kidney fat will be established and the kidneys supported in their normal position.

It is well to mention here the value of utilizing the force of gravity to assist in reducing prolapsed kidneys, or other abdominal or pelvic organs. Elevating the foot of the bed from four to six inches so that gravity may work during sleep is a valuable aid. Other aids that may be mentioned and strongly recommended are: walking on all fours, or assuming a position head downward, preferably upon the back, on an ironing board or similar support, one end of which is on the floor and the other on the side of the bed or chair. Lying on the bed with the hips greatly elevated is similar in effect.

Milk in Women's Disorders

I have already spoken of the favorable influence of the milk diet in menstrual and other disorders peculiar to women. I should like to emphasize here, however, that in chronic inflammatory conditions of the uterus or ovaries, the acute pain, due to the presence of an extra amount of blood, is always present at the menstrual period.

Therefore, it is good practice to start the milk treatment directly after the menses have ceased—fasting during, or before and during the period. Keep up the treatment for three weeks, and then discontinue (fast or fruit fast) until after the cessation of the next period. This will obviate the acute pain that frequently accompanies an increase in the amount of fluid circulating in the blood vessels, and thereby prevent “pressure pains.”

If, however, the woman can endure the discomfort of taking the milk right through the period, it is always wise to continue the treatment uninterrupted, with almost every assurance that at the next period the condition will have materially improved.

The effect is more or less similar to that of a normal labor, which quite frequently brings about a fairly normal pelvic condition, at least so far as menstrual irregularities are concerned.

When Skin Eruptions Develop

Some people whose skin is very delicate tend to develop pimples and boils when on the full milk diet. This they may ascribe to an excess of nutriment, and in some instances it is quite likely they may be right. Personally, however, I am of the opinion that the trouble originates chiefly in an increased eliminative effort of the system, plus usually defective elimination from the bowels. When on the milk diet two or even three daily evacuations should be secured if possible to facilitate the removal of toxic matter from the system.

This can best be accomplished by the free use of orange juice, one or two oranges being taken five minutes before the first milk in morning, and a tablespoon or more of juice being taken fifteen minutes after the milk, for three or four feedings.

In addition to this, a high enema of a quart of warm water should be taken each night. This should be taken in the knee-chest position—kneeling on a rug or bathmat or on the bathroom floor, the hips elevated and the left shoulder lowered to the floor. This facilitates the flow of water up beyond the sigmoid flexure, and its passage along the transverse colon. When finally voided, this water often brings away old scybællæ, or adherent masses of fecal matter, that have attached themselves to the bowel surfaces. The poisons from these semi-dried masses are absorbed into the circulation. The result is the disfiguring condition of the skin, manifested in pimples and in skin eruptions.

An occasional dose of castor oil may also aid in sweeping the accumulated poisons of intestinal decomposition out of the intestine, besides putting the entire canal in a better functioning condition, though this is rarely advised.

In addition to active elimination, however, it might be well to reduce the fat content of the milk. For, when there is any excess of fat in the dietary, it may require active exercise in the open air to oxidize and completely utilize it.

For this reason, “low fat content milk” or skim milk should be used instead of whole milk – especially where there is any tendency toward skin eruption.

The Milk Diet in Heart Disease

Most physicians will say that in the severe forms of heart disease, complicated by leaky valves or failure in the normal compensation, any additional strain on the heart, through increasing the amount of the circulatory fluid, is decidedly to be avoided.

Superficially considered, this might seem to have some elements of sense in it, as the indications are for the most perfect possible rest for the damaged organ. This does not mean to imply that a heart in a damaged state or a ruptured valve can be cured by a course of milk treatment.

Yet the increased amount of nutrition secured from the full milk diet actually tends to restore compensation, and bring about a condition in which the patient may live in comparative comfort for many years.

In those cases, however, in which the chief case of the “murmur” or the irregularity is anemia, or general debility, or nervous exhaustion, perfect heart function can quite frequently be restored.

Where there is poor circulation, with a sallow, pasty skin, where the individual lacks strength and endurance, or where the typical “anemic murmur” may have developed, a few days’ faithful treatment will usually suffice to bring about an astounding degree of improvement—not along in increasing the strength and vigor of the heart, but also in a gratifying increase in the general health.

The Milk Treatment in Pellagra

The rapid increase in pellagra in the South has directed much discussion to its probable cause, and to the most likely method of curing this serious and often fatal disorder.

Whether the condition be a “deficiency disorder” due to lack of protein and vitamins, or whether it be of germ origin, has not been definitely determined.

My personal opinion is that it is due to dietetic deficiencies, and it is the consensus of opinion that, whatever the cause, the most successful, in fact, the only successful treatment is dietary.

In the *New York Medical Journal*, May 1, 1915, Dr. S.H. Ensminger states regarding diet for pellagra: “In all cases milk should be given if possible. The most important feature of the whole subject is rest.”

There is no doubt in mind that the cases reported which did not respond successfully to the milk treatment simply did not get their milk the *proper way*. This is: one glass, or eight ounces, every half hour while awake—taking an average of twenty glasses each day.

In my opinion if this treatment could be given it would cure practically every pellagic in the world. But the poor victims can't get the milk that would save their lives, for there is little or no fresh milk to be had in the pellagrous regions.

The “Milk Reaction” in Rheumatism

One of the most pronounced reactions following the inauguration of the milk treatment is found in rheumatic or painful joint or muscle-sheath conditions. Usually, a few days after starting treatment, there is a definite return of the old symptoms, the pain most generally appearing in the area in which it originally manifested itself.

If the patient persists in the treatment, paying no attention to the return of his pain, the attack usually disappears within forty-eight hours or so. Within a few days a second attack may come, but less pronounced than the first, and lasting only a short time, and so on.

The reason these “crises” manifest themselves is that the circulation is greatly increased, while yet the blood is loaded with toxins.

The excessive amount of lactic or uric acid—or whatever the product of mal-metabolism that causes rheumatism—is forced by

the increased circulation into the tissues in which the circulation had previously been rather sluggish.

Another reason is that the diluted blood tends to re-absorb these toxic elements, and in the process causes an irritation of originally affected nerves, with old pains.

Remember, the eradication of the poisons of rheumatism by the exclusive milk diet is not the matter of a day or a week. It may take a month or several months.

For the improvement follows because of the fact that milk lacks the elements out of which the poisons of rheumatism are made. It further aids by correcting the depraved processes of digestion, metabolism and elimination that favor the accumulation of the rheumatic toxins in the blood.

Bear in mind that milk is absolutely free from the purin bodies that go to form uric acid, which are found so plentifully in meat, eggs, fish, coffee, tea and cocoa, and which are factors in the development of rheumatic and gouty conditions.

Dr. Sherman, of Columbia University, in commenting on this fact, says: "Milk has the advantage of not containing the substances which yield uric acid to the body."

Arthritis, particularly if of gonorrhoeal origin, may refuse to yield to the milk treatment, and may require baking of the knee or areas involved, or other forms of special treatment. But this is somewhat outside of the scope of the present work. However, the worst case I ever saw—a "stretcher case"—received complete cure by a "finish fast" of fifty-four days, and six weeks of milk diet.

Other symptoms of the milk régime

Various other symptoms may arise while one is taking milk, such as headache, backache, pains in the limbs, feelings of weakness and lethargy, or sleeplessness. The rule is to take no notice of these unless fever accompanies them. Fasting is then indicated, the milk being resumed when the acute attack subsides. All the symptoms manifested are indications of the house-cleaning and rejuvenation which the body is undergoing, and are no sign that the milk should be discontinued.

In many cases patients will be able to take the milk diet without a return of any symptoms, or without any apparently adverse developments. They will progress steadily in overcoming the specific condition or conditions for which the milk taken, until their health is restored to normal.

They may be considered as fortunate individuals, but usually where this steady progression is possible there is not the severe physical abnormality that is present in those cases that do have more or less troubling symptoms.

Where these symptoms develop, I believe the individual can consider himself extremely fortunate also, for it shows that the milk diet is not only producing a favorable reaction in the system, but that the vitality of the body is sufficient to bring about this reaction with the proper aid. While such symptoms may not develop in some individuals with great vitality, rest assured that they will not develop where the vitality has been lowered to the point from which there is no return. Also be assured that there is no other régime that will bring these symptoms and the returning health they indicate more quickly, and yet with less severity than will the milk diet.

When these symptoms develop, the diet usually should be continued steadily and without interruption, unless their appearance is at or about the sixth week (say from five to seven weeks). If they develop at this time, a fast is in order and this may continue for a few days, or it may be a "finish" fast, and the milk diet should be resumed at its completion.

The only exception, perhaps, to this rule is in case fever develops. In this instance the fast should be instituted at once and continued until the temperature is normal, and, for safety's sake (usually), for a day or so longer.

By following this plan the body will be purified, rejuvenated and restored to a higher degree of health that will be permanent so long as the mode of living is such as to preserve normal functioning activity.

We have in the milk diet, without doubt, the most powerfully effective of all agents for the eradication of poisons, toxins, waste, and unnatural elements of any nature; and for the restoration to normal of any tissue and function capable of restoration; and for

removing all obstacles to the highest manifestation of the vital force within the body. No other single food can compare with it, and, for many disorders, no combinations of foods can equal it for effectiveness.

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