

Physico-Clinical Medicine

AND

CLINICS OF DR. ALBERT ABRAMS

A MONTHLY JOURNAL DEVOTED TO THE STUDY OF
THE ELECTRONIC REACTIONS OF ABRAMS AND
THE VISCERAL REFLEXES OF ABRAMS IN
THE DIAGNOSIS, TREATMENT AND
PATHOLOGY OF DISEASE

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CONTENTS

New College Officers	2
Message to ERA Physicians	3
The College Situation	5
Clinical Lectures	7
Miscellaneous	14
Clinical Lectures (Continued)	23

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COLLEGE OF ELECTRONIC MEDICINE

Blanche and Jeanne R. Abrams Memorial Foundation

2151 SACRAMENTO STREET

San Francisco, California

WORKS BY ALBERT ABRAMS

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Physico-Clinical Medicine

and

The Clinics of Dr. Albert Abrams

All the subject-matter of this Journal refers to the original research work of Dr. Albert Abrams. Citations from other sources will be duly accredited. "SPONDYLOTHERAPY" and "NEW CONCEPTS IN DIAGNOSIS AND TREATMENT" constitute the archetype of this Journal and "S," in parenthesis, followed by a number, refers to the page in the former and "N. C." to the latter work where extended consideration of the subject cited will be found. "J." refers to a previous number of this Journal. The motive of this Journal is to replace the cell doctrine by the Electron theory. Vital phenomena are dynamic and the actions of organisms should be regarded as processes and not as structures. Exclusivism is excluded inasmuch as all sciences are embraced in practical medicine and diagnosis must invoke physical, biological and chemical methods. All problems in medicine not in accord with the progress made in physical science are doomed to perish.

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THE CLINICS OF DR. ALBERT ABRAMS
2151 SACRAMENTO ST. SAN FRANCISCO, CAL.

ANNOUNCEMENT — OPEN FORUM FOR ERA PHYSICIANS

The Journal will conduct an Open Forum for the service of ERA practitioners wherein they will have the privilege of reporting interesting cases and exchanging views on methods of obtaining results. Space will be given for the publication of reports of cases that will be of general aid and interest to the men in the field and any findings or discoveries of especial value.

COURSES IN SAN FRANCISCO

Dr. H. W. Wirklich, associate of the late Dr. Albert Abrams, will continue the monthly instruction in "Electronic Medicine."

"In closing, let me say that until one hour before the Trustees' Meeting of March 18, 1924, I had not the slightest thought nor had one word been spoken to me concerning the presidency of the College of Electronic Medicine. At the meeting the Trustees elected me as Trustee, President and Manager. The honor came to me absolutely unsought. The fact that I happened to be in San Francisco at the time no doubt had great bearing on my election. I well realize that had any one of a number of other doctors throughout the country been present at that hour, and willing to give up his career elsewhere, this great responsibility might well have gone to someone else. Immediate decision and action were required on my part, owing to the vital matters arising hourly, so I found myself in succeeding Doctor Abrams, the beloved man whose life work was his mission for the cause of humanity, unexpectedly elected to what appeals to me as the greatest honor that could come to an ERA physician.

"Cognizant of the tremendous responsibilities it involves I merely let the thought of service decide so momentous a question. I have burned my bridges behind me, sacrificed my large practice in Portland, Oregon; have offered my sanitarium at the latter place for sale; and have thrown my all into this cause for the College and humanity and indirectly for each individual ERA physician. I accept the office humbly, but with all the purpose I possess, and I have no doubt of the success of the College and all it involves if I may but count on each one of you to pull with me in this one co-operative undertaking.

"Could I talk with you heart to heart, I believe I could win your complete confidence in my purpose to dedicate my life to one thing: viz., to carry out to the best of my ability the intent and wishes of Doctor Abrams and to devote myself entirely to the welfare of ERA. I further pledge my efforts to work for the unification of the ERA physicians in order to fulfill our function in the College work and to promote harmony among the associations in the field. Let the associations become the complete expression of the field members, and together we can work in accord and labor to the highest pinnacle of success."

2151 Sacramento Street, San Francisco, California.

THE COLLEGE SITUATION

A PLEA FOR NEUTRALITY

Another occasion has arisen for clear thinking and calm judgment. The destinies of Electronic Therapy must necessarily depend upon the personal integrity, loyalty of purpose and administrative skill of its followers. Honest differences of opinion must necessarily exist in all activities of life, caused by differences in viewpoint, information and the inevitable personal equation.

In the present instance serious differences of opinion have arisen among men of unquestionable integrity, unselfish motives and high idealism. Until the courts have passed upon the intricate questions involved, it is merely the part of fair play to suspend judgment and await a clearer vision before making possibly irrevocable decisions. The paramount duty of every Electronist just now is to stand by the "de facto" administration of the College of Electronic Medicine without any reservations whatsoever.

The great vision of Dr. Abrams for establishing and maintaining the College must be perpetuated by his followers, entirely regardless of the actual personnel handling its affairs, assuming always their possession of the personal qualities which entitle them to leadership. It is but fair that a brief summary of the situation should be given to the profession, without any attempt whatever to pass upon the merits of the questions involved, which must in due time be determined by the interpretation of the courts to which appeal is being made for legal adjudication. The following statements are based upon what is considered good authority and are believed to be at this time matters of record:

A charter was secured for the College of Electronic Medicine with a capital of 10,000 shares, upon which no dividends could be legally declared because of the philanthropic and educational character of the corporation. Under a ruling of the Federal Income Tax Division, all moneys placed in the treasury of the College were held free from personal income tax. During the last year or more of his lifetime, Dr. Abrams contributed very largely from his personal income to the College Treasury, as did other members of the profession. During his lifetime the 9,000 shares of the capital stock of the College corporation, held by

Dr. Abrams, absolutely controlled the operations of the College and elected a Board of Trustees to administer its affairs, a group consisting of some of the best known men in the profession.

According to the last will and testament of Dr. Abrams, these 9900 shares of capital stock (99% of the total) was left in trust to a group of Trustees consisting largely of his blood relatives and heirs, to be administered in perpetuity in accordance with his known desires. Differences of opinion have arisen between the group of Trustees named in the will, controlling 99% of the shares of the College corporation, and the group of Trustees in actual control of the College operations, elected by Dr. Abrams during his lifetime. We must not pre-judge the merits of this controversy. We must assume that all parties are acting in good faith, and leave to the courts the determination of the legal questions involved, trusting always in the triumph of righteousness and truth. Any attempt to pre-judge the situation or to take sides in the controversy might result disastrously to the College of Electronic Medicine. Our plain duty to the memory of our great leader is to stand by and hold fast, giving every assistance possible to the splendid men who, with firm belief in the merits of their own position, and with unselfish devotion to the great cause, have undertaken the responsibilities of carrying on the work of the College to a successful issue.

FRANCIS A. CAVE, M. D., D. O.,

President A ERA.

PROFESSIONAL INSURANCE CORPORATION

It is the duty of every ERA physician to give whole-hearted support to this corporation. The officers are composed of ERA physicians who are thoroughly familiar with the principles of Electronic Medicine, and they above all are best fitted to protect you against any law suits that may arise from the practice of ERA methods.

The premiums are not only used for maintaining a legal department, headed by former Assistant Attorney General Mr. Sampson, one of the ablest lawyers in Des Moines, Iowa, but a large amount is spent for various educational features.

It is really an ERA protective institution, composed wholly of ERA physicians, and its resources used to make known to the public the principles of Electronic Medicine.

If you are not covered by any insurance, apply immediately for particulars to the following address: Professional Insurance Corp., 742 Insurance Exchange Building, Des Moines, Iowa.

CLINICAL LECTURES

Clinical Lectures of Dr. Albert Abrams

In the treatment of insanity I would suggest that some doctor make a specialty of applying electronic methods in the treatment of patients which belong to that branch of neurology known as psychiatry. The reward would be great from the viewpoint of your ability to cure patients. As you know, the average insane asylum is a living tomb and nothing else. Nothing can be done for these patients because a recognition of the trouble has not been made. I told you I had visited all the insane asylums in the country. I knew just as much as did anybody else, but knew absolutely nothing. This much I will say to you, that every case of insanity is due to Syphilis. No Syphilis, no Insanity. This refers not only to Acquired Syphilis but largely and in the majority of cases to Congenital Syphilis. Syphilis in the young is dubbed Dementia Præcox and the lesion is usually found by my methods in the frontal region.

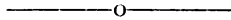
The method of treatment in these cases is not only a general one by the use of the Oscilloclast with electrode over the spleen, but also a local one with electrode over the lesion located in the brain. The form of this insanity is expressed by the localization of the lesion. At the present time the average psychopathologist makes the diagnosis of insanity according to the subjective symptoms of the patient. He is wholly dependent upon his diagnosis and he makes a long list of names for different conditions which are purely subjective diagnoses.

That is the fault with the medical profession. We treat names and treat diseases; and diseases are only symptoms of a basic condition. The results that we have had in early cases of insanity before structural changes have taken place have been phenomenal. Now there is a tendency to use these methods in the different insane asylums in the state.

Here is something interesting. A doctor reports, "I have been able to get reactions from a phonograph record." There is nothing hidden that shall not be revealed. I don't know whether he is correct or not. I want to see if we can get the energy from this phonograph record. Go over this record with the pointed electrode. First go over it with the horseshoe magnet. Do it thoroughly. That's right, Doctor. First set the instrument at 49. I get a human reaction. Let me do it five times in succession. Dr. W. P. Myers of Anaheim, California, called my attention to the fact that he got a diagnosis from phonograph records, so I wanted to try it out. Check me up. Stop. Correct. I get it every time. I find that my experiment confirms his observation. It sounds fantastic, doesn't it? But when you come to think of it, it is not impossible.

EXPERIMENT — REACTION FROM HUMAN VOICE

Now, I want to try out another experiment. This is an original experiment with me, and I want to see how it works out. One of the doctors has a reaction of 55. Hold the electrode toward him and have him talk and I will see if I can get a reaction from his voice. Put the bifurcated cord in the dynamizer and attach a large round electrode. Now, hold the electrode toward him but not so close that he can breathe on it or touch it or so that the saliva might strike it. Now say something, no matter what, just so we get the sound of your voice. You see I get the reaction of 55. Give me the rod. Keep on talking until I tell you to stop. If you were a woman, I would not need to tell you to do that. Yes, I get the reaction of Acquired. Let us measure it. Keep on talking. You see he is running out of ideas. No matter; it's all the same. Stop. What is the ohmage? 2 ohms. Try 3. No, it is 2 ohms. Check me up again. Correct. 2 ohms. That will do, Doctor. Thank you very much. Now, please write your signature and we will see what reaction we get from that. Depolarize it thoroughly with the horseshoe magnet. That's good. That's enough. Don't let me know when you come to it. Stop. I get the reaction of Acquired. Measure it. What is it? 2 ohms. Try 3 ohms. You see it measures 2 ohms, the same as from his voice. That is very interesting, isn't it? You all heard that, didn't you? Funny, isn't it? This isn't our regular work, I know. But I do things like this to vary the monotony. These blood examinations bore me to death. But what can I do? Sometimes I think I will give up my practice entirely and just devote myself to research work. But I have to consider my men and the College work.



ANESTHESIA

I am very anxious to obtain 100 per cent. **anesthesia** with the Oscilloclast. Just think what that would mean. With the Oscilloclast we can practically get anesthesia in about 80 per cent. of the people—that is, from 60 to 100 per cent. Doctor Noe of Pacific Grove performed the first operation using the Oscilloclast. It was for the removal of a rectum. I want to find out why I can get only 10 or 12 per cent. of anesthesia in 20 per cent. of the people. It would be of great value in obstetrical work if you could get painless childbirth. Think what that would mean. Experiments would be necessary to determine where it would be best to place the electrode. Well, that is a problem to be worked out in the future. It will be done. Mark my word. Somebody will do it. I can't do everything. All I can hope to do is to establish a principle. It is all very crude at present compared to what it will be in the future. But the principle is there and men will come along with instruments and they will work out all these details and establish as facts all we are endeavoring to prove. It may not be in my lifetime; probably will not be. But that makes no difference.

Man has practically the same composition as all things in nature. He is purely an electric organism. The nature of anything is established by the number of electrons, and secondly, by their arrangement. Lamp black, coal and the diamond all have the same chemical composition. It is a matter of allotropism, a difference in the arrangement of the allotropes. Someone will come along and change one material into another, as the old alchemists attempted to do.

I will have one of the doctors expose his arm and put the bottle containing a specimen of Carcinoma against his arm. Have him go out of the room and I will show you how you will get the reaction of Carcinoma over the very spot. Go out in the hall and you go along with him, Dr. B——. Don't tell me where he places the bottle. Just hold it a minute or two. Then come in and we will go over the arm. Put it someplace on that arm, but don't show us where. (Doctors go out in the hall and then return to Clinic.) Did you do it? Good. Go over his arm. First use the pad. Stop. Take the pointed electrode. Stop. Was that correct? (The doctor states that the reaction was obtained over the spot on which the bottle containing pathological specimen was held.) Very good. Now I will try it over another, Doctor. Try this lady here. Hold the bottle on your arm for 15 seconds. I want to try it on her especially because she is one of the small percentage who can not get more than 10 or 15 per cent. of anesthesia from the Oscilloclast. Hold the specimen of Carcinoma on her arm for only 15 seconds. Now go over her arm. I get no reaction.

Try Dr. F—— in whom we can obtain or produce no anesthesia, that is to any marked extent. Hold the bottle on his arm for 15 second. Now, go over his arm. I get no reaction of Carcinoma. That is very interesting. Put this down as the result of our observations. In cases where anesthesia is difficult to produce, I can get no reaction of Carcinoma after holding specimen on arm for 15 seconds. In one in whom I get 100 per cent. anesthesia I get reaction of Carcinoma when specimen is put on the arm.

Now, I will have the horseshoe magnet held over the arm of one who gets only 10 per cent. anesthesia for 15 seconds, and try to get reaction of Carcinoma afterwards. Go over his arm. I get no reaction of Carcinoma.

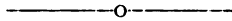
Now, put the specimen of Carcinoma on this difficult subject's arm and have him insulated on a rubber mat. Hold it for 15 seconds. Now, go over it again for Carcinoma. I still get no reaction.

Now, shortcircuit the head with a piece of metal and hold the specimen of Carcinoma on the arm for 15 seconds. Watch the time, are you? That's right, thank you, Doctor. Good. Now, go over the arm for Carcinoma. Stop. I get the reaction. Do you all hear it. Wait six seconds for a reaction. Check me up. Correct. Yes, you all see that I get the reaction. Why that is, I don't know.

Have another doctor who is difficult to anesthetize face west and stand on a rubber mat. Hold the specimen on his arm for 15 seconds. Is the time up? All right. Go over his arm. I can get no reaction. Take plenty of time.

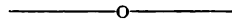
Put the specimen of Carcinoma on his arm again and shortcircuit the head with a piece of metal held over the head for 15 seconds. Also hold the specimen on his arm for 15 seconds. Now, go over his arm and look for Carcinoma. Stop. Do you hear it? Now, I get the reaction of Carcinoma. That only opens a suggestion. Let us see how long it lasts. Take out your watch and let me know when a minute is over. All right. See if we can get any reaction. Stop. Yes, the reaction of Carcinoma is still present after a minute.

I want you two doctors to keep on with your experimental work on anesthesia on the Oscilloclast and let me know your results. Keep on trying along the lines suggested. Try using three cords at rate 7 at the back of the neck.



Give me the first mail specimen. I don't care which one. Don't touch the specimen with your fingers. Give me the letter so that I can be reading it while you are preparing the specimen. That's right. Thank you. "Woman. Three years ago was taken sick with asthma and influenza followed by ascites. Urine shows albumin. Heart rapid. Has been in bed nearly a year. Lost weight and is very poorly nourished."

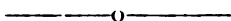
Pull down the curtain. There is too much light. Female reaction. His reactions are pretty good this morning. What have you been doing to yourself? Let us take our time. Carcinoma, Sarcoma, Tuberculosis. Negative. Try 55. That is what is the matter. She has Acquired Syphilis, cardiovascular strain. 37 ohms. Check me up. Try 38. 37 ohms is correct. Let's be absolutely sure. Give me the E D reaction. Yes, I get the reaction of 55. The examiner's right foot touches the left foot of the subject. With the toe in contact, it makes the reaction better.



Specimen. "Baby, ten months old. Has had convulsions since 1 month and 6 days old. They would come from 7 to 10 days apart. The longest period without them was three weeks. The last attack lasted from 6 to 7 days. Spells of vomiting for several days. Was in Children's Hospital for 2 weeks. Seen by 40 different doctors. No relief."

There are many things that have to be taken into consideration. The most important thing is the question of forceps delivery. Or whether it is pylorospasm or not. It is human blood. Don't take any chances. Carcinoma. Sarcoma. Tuberculosis. Strep. Acquired. Negative. Try 55 even if it is a baby. You never can tell. Now, we will look for **Congenital Syphilis**. Present. When you set the instrument at 57, that reveals bovine syphilis; 20 shows human type. This is of paternal origin. Let's see what strain; cerebral strain. 13 ohms. Check me up. Try 14 ohms. 13 ohms is correct. Get your cord and locate it. In every case of Syphilis, the only thing that shows the reaction is the blood, the liver, the spleen and spinal cord. Go over the head. Use the plate. Doctor, please. Go all over the head. Don't tell me where you are. Stop.

Where is it? Measure it. Where is the tape? It's always in that drawer. That's it, thank you. It measures 6 cm. above the right ear. If you don't get correct localization, you may as well give up the whole business. Send a wire to the doctor. Be sure and get that off at once. Wire: "Congenital Syphilis; present. Lesion six centimeters above top of right ear. S S 3 and 3 over lesion. Give all night treatment if possible."



Now, gentlemen, we will have a little recess. Doctor Johnson of Los Angeles is visiting the Clinic today. Tell the doctors about some of your cases. There was one of your patients in the other day who told about getting his sight restored under your treatment. Tell the men about him. It was very interesting.

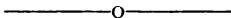
Doctor Johnson: This patient was a man who gave up his law practice in 1912. He gradually began to lose his sight several years ago. Finally he had to give up his business. He had a big legal practice with many attorneys under him. He was unable to read manuscript and could do nothing. He heard of the ERA treatment and came to me. I found Acquired Syphilis measuring 42 ohms. He had been having 606 treatment. He got so he would take no more mercury treatment. We found Cryptogenic Neisserian in the eyes as well as lues. I treated him in the morning at rate 4 over the eyes and gave him the next treatment in the afternoon at rate 3 over the eyes; and also gave S S 3. When he first came he could not read large print and could not come down town alone. He couldn't see well enough to cross the streets. After five days' treatment, he said, "I am the happiest man in the world this morning. I can read that sign on your door." It was written in ordinary quarter inch letters. "I am getting well," he said. "A day or so later I want to go to San Francisco on business." He came up alone. He said he wanted to come to see Doctor Abrams and thank him personally for the benefit he had received from the ERA treatment. This patient is feeling so much better in every way that he feels wonderfully encouraged. This condition had been diagnosed as everything, but no doctor had done him any good. He is a man of standing and belongs to a very prominent family.

What you can do with the eye in young people is simply wonderful. A little boy 16 years came to me. He was undersize, and totally blind in the right eye. The parents had just taken him from the oculist who had said that within four months he would be totally blind. They had called it glaucoma. We found it to be syphilitic, bovine type. That child had a large sore on the side of the leg below the knee that had never shown any disposition to heal. This boy in four months' treatment is able to take ordinary newspapers and read with the eye that was totally blind. Covering up the good eye, he could read any line from the headlines down to ordinary print, and the other eye was just as good. He says that the only difference between the two eyes was that the one eye was only a little blurred.

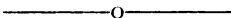
I find using a rigid diet will often bring good results. I find that the Oscilloclast is the nearest to a panacea that I have ever found in 28 years

of practice. In many cases of Carcinoma with 11 ohms, if they have a fast I find they will get better results. I have one case of a woman with 16 ohms of Carcinoma. She has 2 treatments a day. Just has 8 oranges a day. She has gone 32 days without food and is feeling better. You get rid of the toxins more quickly than when they eat everything. We put them to bed and put them on a fast. In this case the ohmage is down to 4 ohms. Four years ago Mayo's removed one breast. Two years ago they removed all the pelvic organs for Carcinoma. She went back this past year with trouble with the other breast. She is now wonderfully improved under the ERA treatment.

Doctor Abrams: Thank you very much, Doctor. That is very interesting and it is a good thing for the men to hear the good side of ERA. But you should also tell them of the bad side, too. They should know about the failures also.



"Girl, age 15 years. Nasal obstruction. Slight attacks of asthma for one year. Can not breathe through nose during attacks. Constant watery discharge. Must use spray. Eight doctors advised operation." How she escaped, with all that advice, is a miracle. "Underweight. No pep." If it were a permanent nasal obstruction, it would be continuous. There are about one hundred different causes for asthma because there are one hundred different ways of irritating the pneumogastric nerve. She probably has some sinus infection.



Sarcoma of the bone. Non-metastatic. 5 ohms. Try 6. Check me up. 5 ohms is correct. Set it at 60 for Streptotoxemia. Strep of the sinus. Present. See if there is any Acquired. No. Congenital D. R. 40 ohms. That is very high for a girl of that age. Have her come in. (Patient comes in.)

Don't be frightened, my child. No one is going to hurt you. These are all doctors here. You say you have an obstruction in your nose. Hand me that piece of ground glass out of the drawer. That's it. I will show you a very simple method of testing out nasal obstruction. Hold the piece of glass below the nostrils and have her breathe on it. Then you can see very plainly if there is any obstruction. You see there is none. You can see the right side of the face is swollen compared to the other side. It is very marked. Have you any pain?

Patient: No.

Doctor Abrams: Let me listen to your breathing. There are no rales now. Has the urine been examined?

Patient:.. No.

Doctor Abrams: Go over her face for 58. Don't let me know where you are. Stop. Where were you? Right ethmoid and right antrum. Try it again. Check me up. Stop. Correct. Now look for Strep. Use

the small round electrode. Go over all the sinuses. Stop. Where are you? Right antrum. The condition here is clear. First of all we have to give her general treatment, S S 3. It will take a little while, for there are several things the matter with her. Use rate 3 and rate 2 over the right antrum. Let's see your hand, my child. You can see the heavy incurvation of the little finger which indicates Congenital D. R.

Clinic Case. "Married woman; two children. Pains in both arm pits; worse on left. Has small lump in arm pit. Afraid of Carcinoma. No loss in weight. General health good." People are beginning to understand precautionary measures.

Give me the rod. I'll use the rod for a change. It is just as good but I am more accustomed to percussion. And then I use percussion so that the doctors can all hear me. I could tell by percussion because I am used to it, but you couldn't. It is a good thing to check up with the rod when the reactions are poor.

Female reaction. Carcinoma, negative. Sarcoma, present. Both breasts, present. Metastatic. 8 ohms. Congenital D. R. 39 ohms. Check me up. Correct. Have her come in. (Patient comes in.) Don't be frightened, little lady. These are all doctors, and they are just here to help you. That's right, smile. Have you pain?

Patient: Yes, under the left arm. There is a lump there.

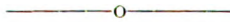
Doctor Abrams: Yes, I see. Go over her breast for 58. Don't get nervous. They won't expose you. Have her put her arms out. That's right. Don't tell me where you are. Stop. Where is it? Over the left breast. Put it under the left arm pit. Stop. Yes, I get the reaction under the arm pit also. Give her general treatment. Paint chest with mercurochrome and give Mixture Anti-Malignans.

Female. "Extremely nervous. Always tired and depressed. Laparotomy for retroverted uterus; suspension operation performed. No loss in weight. Appetite fair. Also bleeding with urine ceased recently under G. U. treatment. The first examination we found Carcinoma; non-metastatic; pelvic cavity, left side; and right breast, 2 ohms. Congenital Syphilis; 34 ohms." She has had 12 days' treatment. Put the blood in. Hurry up, Doctor. Be careful how you handle that specimen. Set it at 50. Carcinoma is still present. $9/25$ of an ohm. It is going down. See what the Syphilis measures. Yes, it is $9/25$ of an ohm also. Let's get the E. D. reaction for Carcinoma. Yes, you see it is still present. Now, check up on the ohmage. It is the same. Have her come in. (Patient comes in.) From the theoretic standpoint of your blood you are 85 per cent. better. You may not feel better, for it takes a little time to get results. But keep right on with the same treatment. You are getting better.

Miscellaneous



College of Electronic Medicine Blanche and Jeanne R. Abrams Memorial Foundation, now under construction in San Francisco. Building will be completed and ready for occupancy by the latter part of this year.



THE PRICE OF PROGRESS

An article in Forbes Magazine entitled "The Price of Progress" gives a graphic account of the history of persecution and ridicule which all new thoughts and methods have had to suffer throughout the ages.

Beginning with Socrates, "It is because Socrates was an innovator that we, who see in him the founder of philosophical inquiry, regard him as a great man. It was because Socrates was an innovator that the old fashioned Greeks who saw in the

new fangled culture the origin of all their recent distresses and disasters, regarded him as a great criminal."

Anaxagoras, who is considered to be the one who paved the way for the atomic theory, was arrested by the ignorant mob.

Roger Bacon, who created the principles of logic which we use today, was bitterly persecuted in his time. His biographer says, "His work suffered from the prevailing ignorance, for he was persecuted and imprisoned, merely because he was eccentric and knew too much."

Galileo had many strange new ideas and got into many difficulties, aside from insisting that the earth moves. Galileo found by experimenting that the former theory that objects fall at a rate directly in proportion to their weight was untrue. Although he demonstrated the fact before a gathering of learned professors, he was hounded out of the country. When by means of his telescope he was able to discover the moons of Jupiter, many refused to believe their eyes and others refused to look at all. One who had declined to look died soon afterwards. "I hope," said Galileo, "that he saw them on his way to heaven."

Even Sir Isaac Newton had to meet the opposition of learned men opposed to his views and he himself said, "A man must either resolve to put out nothing new or to become a slave to defend it."

The field of medicine is not free from this same spirit of jealousy, bigotry and ignorance. Arnold of Villanova and Peter of Abano had to flee for their lives because they maintained that disease is due to natural rather than supernatural causes. Harvey had many difficulties in getting his ideas about the circulation of the blood accepted and made the statement that "anatomists were so blinded by dogma and tradition that they failed to see the most obvious facts for themselves." Edward Jenner met with bitter opposition from all classes.

The scientific results attained in the nineteenth century have been said to be the working out and proving of hypotheses "that were mere forlorn hopes looked on with general contempt, if at all heeded when the eighteenth century came to a close."

However, the nineteenth century has not been free from the spirit of intolerance. Lord Kelvin, after years of study and experimentation in regard to the sun, wrote a treatise on the length of time it would give off heat. "The entire geological

and biological world were up in arms in a trice. Two or three generations ago they hurled brickbats at any one who even hinted that the solar system might be more than six thousand years old. Now they jeered in derision at the attempt to limit the life-bearing period of our globe to a paltry fifteen or twenty million years."

Even in America seventy years ago any one who suggested any innovation or improvement was considered an enemy of society. The first sewing machine was smashed; the first railroad was torn up; the first telegraph wires cut. The first iron plows were said to poison the soil. Adam Thompson, who installed the first modern bathtub in 1843, was vigorously denounced by all classes including doctors and his bathtub was considered as "subversive of democratic simplicity and pioneer hardihood." Alexander Bell was repeatedly assured that his telephone was an "absurd toy" that would cause his financial ruin.

Oliver Wendell Holmes says that "if you invent anything that puts an old machine out of fashion, or solve a problem that has puzzled all the world up to your time," you must expect to be called a crank. "There never was an idea started that woke men out of their stupid indifference but its originator was spoken of as a crank."

As Samuel Johnson expresses it, "Nothing has retarded the advancement of learning more than the disposition of vulgar minds to ridicule and vilify that which they can not understand."

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REMARKS BY DR. ALBERT ABRAMS

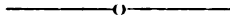
August 3, 1923

According to physics, moving particles must emit energy. Owing to inability to detect this energy, it is spoken of as stationary or non-radiant.

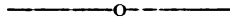
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There is one universal law in nature, and diseases common to man are also present in the vegetable and mineral kingdoms. Iron rust gives a reaction of cancer. In plants and flowers we have all kinds of reactions similar to those in disease. There is such a thing as a cancer of plants.

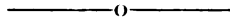
Despite the fact that the Crocker Cancer Research Laboratory of Columbia University announced that no cures were effected, radium is still being used. It may in extreme instances in large doses reduce the rate of the growth, but later the growth continues and destructive changes in the tissues are induced which are worse than death. We are handling a dangerous sword. The alpha or positively charged rays of radium have a very feeble penetration and they constitute over 95 per cent. of the energy evolved from radioactive substances. It has been shown by our experiments that cancer yields a positive energy; therefore it is reasonable to suppose that theoretically at least the use of radium serves only to increase the growth of the cancer.



Professor Robert Andrew Milliken isolated and weighed electrons.



The nerve of vision, only two-fifths of an inch in diameter, contains five hundred thousand to two hundred thousand perfectly insulated fibers.



IS THE HUMAN BODY A RADIO?

PARIS, March 31.—Man is a wireless transmitter.

The time may come when man also will be a wireless receiver, tuned in to receive the tiny radio waves that are emitted by other bodies and to communicate with others by means of these waves.

This is the prediction of Georges Lakhovsky, eminent Parisian scientist, who has solved some of the most delicate problems of radio. He has enunciated the theory that all living creatures emit tiny radio waves and that many already communicate with one another, or are attracted to others, by means of these emanations.

Radio Ears

"Physiology teaches us that our sense of direction, of balance, of equilibrium, is due to certain tiny canals in the ear," says Lakhovsky. "It suggests to me that these may play the part of

wireless receivers. Many insects have antennae that are more than feelers. They are wireless receivers and senders in all probability."

Many birds and animals are guided by special radiations, not by instinct or a peculiar sense, says Lakhovsky. Owls and other night birds might get their food by help of radio waves emitted by their prey, he points out.

Some naturalists say bats are guided by their fine hearing and sense of smell. But Lakhovsky says he watched them in Paris while the noise and odors of taxis filled the air. Yet the bats caught insects in the air, guided, he believes, by radiations of their prey.

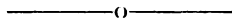
Wave Talk

"Prof. Blondlot," he goes on, "has maintained that man emits radiations that he calls 'N-rays.' This suggests to me that man, too, some day may be able to communicate by means of his own waves, just as I think insects and other living things do now.

"When that day comes doctors may learn to distinguish between the waves emitted by a well man, and those of a sick person. And by using contra-rays, the physician may be able to cure the patient without medicine.

"When we learn more about the waves man emits and how these waves are affected in intensity and length by various microbes, we will pass out of the domain of uncertain diagnosis. We will be positive. We will have a table of wave lengths which will be exact. And we will know what to do in each case.

"The possibilities are limitless. But we have just reached the edge of the subject."



INTERCHANGEABLE CHARACTER OF FORCES

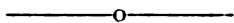
(Arthur Brisbane in "The Examiner")

The interchangeable character of forces, apparently entirely different, is a great aid to science. You send out an electric wave, transform it into a sound wave, and the radio works.

French experimenters have literally transformed the light from Capella, a sun billions of miles away, into sound waves, literally producing "music of the spheres."

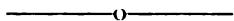
By this transforming of forces our sister planets, at least, if not the outside suns, will eventually talk to us.

Knowing the vibratory rate of a disease, with a like rate one can annihilate it. Impulses occurring singly or at irregular intervals yield no visible effects but when regular the results are often astounding. The rattling of church windows by air waves from the particular pipe of an organ; a bridge strained or broken by trotting horses or the regular tramp of soldiers; the vibration of large buildings by the rumbling of a cannon over a pavement; the vibration of a factory to a dangerous degree by its machinery; the dangerous shaking of a mill by air waves from water falling over a dam are common examples of the potentiality of regular or harmonious vibrations. It is said that with suitable appliances one can break an iron girder by pelting it with pith balls.



Every phenomenon in nature is merely a question of a definite kind of motion or vibration. When the aerial waves are more than 36,000 vibrations per second, the ear can not recognize sound. With 1,800,000,000 vibrations per second we perceive the sensation of heat. When the vibrations are 462,000,000,000 per second, we perceive the sensation of light. As the vibrations gradually increase, the eye perceives one color after another until violet is reached with 733,000,000,000 vibrations per second.

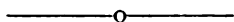
The number and arrangement of atoms determine the properties of a substance. Chemically the diamond, lampblack and charcoal are identical. Oil of roses and coal gas are likewise identical in composition, and it is only the difference in the rate of vibration that determines the odor of each.



June, 1919, Physico-Clinical Medicine, Page 115—

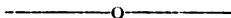
It is almost incredible to believe that by the disintegration of one gram of hydrogen sufficient energy is liberated to raise one million tons to a height of three hundred feet. Illustration from Electrical Experimenter.

Wave motion is one of nature's general methods for transferring energy.

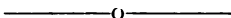


Vibration is the product of energy in motion. To us it is most evident in sound and color. Color is sound made visible

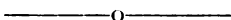
and sound is color made audible. The trumpets blown in unison by the followers of Joshua overthrew the walls of a fortified city; the sounding trumpets at a definite pitch caused the electrons of the walls to respond, with the consequent destruction of the walls.



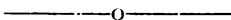
The electronic conception of cancer is as follows: The units of cells are charges of electricity known as electrons. What we call mass, like a cancer, is only a matter of positive and negative electrons plus ether. The atoms of a cell are electrically balanced, but when they are irritated there is an escape of negative electrons giving the cancer a positive reaction. The disturbed placidity of the spheres has invited chaos, and the riot ensuing among the positive electrons suggests unrestricted growth of cells or cells gone mad.



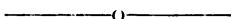
A science is gauged by the amount of mathematics it contains; and when one can neither measure nor express knowledge in numbers, such knowledge is not scientific.



A great triumph of photography is that of securing accurate pictures of the path of flight of single atoms. An atom is so small that it takes one hundred million atoms to make a line an inch long. Formerly an atom was supposed to consist of a single particle without structure. Now it is practically considered a miniature solar system with a central sun called a nucleus and a system of planets rotating around it. Each of these planets is a negative electron.

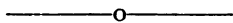


When you hear a small katydid half a mile away, it means that this little insect by rubbing its legs and wings together is able to shake a cubic mile of air. A cubic mile of air weighs more than six million tons.

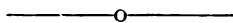


The eye is sensitive to electromagnetic waves of lengths between .00004 cm. and .00008 cm. Anything below the one limit or above the other is invisible.

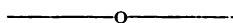
On the surface of the brain is a thin covering called gray matter. In this portion are cells in which lodge the higher mental faculties and all our emotions. Here is a vertical section of this portion of the brain on which the higher faculties depend. Note the large cells of the third layer known as neurons. Our mentality is dependent on the size and the number of these little cells with their branching rootlets or dendrites. The more complex these rootlets, the higher the mental attainment. The brain of idiots and feeble minded persons shows neurons which are few in number, small and possessing few rootlets. Such persons fail to make connection between words, ideas and what they have experienced. In other words, they possess brains which are not co-ordinated. A curious fact is that in the embryo in the womb of the mother these neurons continue to increase in number up to the third or fourth month and then stop. At this period of time these pyramidal neurons are fixed; no additional ones can ever be developed.



Sound waves, heat waves, radio waves and light waves are all of the same order; the only difference is in the wave length. The radio waves are long and the light waves are short. The human ear can not hear below 8 vibrations per second and not higher than about 30,000 vibrations per second. Certain animals can hear above and others below that scale.

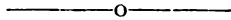


An aeroplane moving with the speed of light could encircle the earth 444 times in one second.



The ether is our confession of ignorance. It is what is left in space from which we have removed all material substance. Light and other radiations consist simply of waves in the ether. It was formerly supposed that it consisted of material particles shot like bullets from a luminous body, and a corpuscular theory was developed. A simple proof is as follows: Monochromatic light falling from a sodium flame upon a diaphragm which contains two narrow slits close together is the only light illuminating these slits. One would suppose that when both slits are open the spot of light upon the screen would be twice as bright as

when the single light is used; but experiments show that when only one slit is open there is a bright spot upon the screen. when both are open the screen is totally dark. If two bullets strike the same spot upon a target, the latter will receive twice as much energy as it would from one impact. Wave motion accounts for this interference phenomenon. If a rope tied at one end to a rigid support is held horizontally by the experimenter and the free end of the rope moved rapidly up and down, a wave motion would be set up in the rope so that the familiar loops and nodes will be seen. Suppose another experimenter imparts to the rope a vibration which would cause every loop to be reversed in direction so that one segment of the rope which was curved upward by the first vibration is curved downward by the second vibration. Obviously the effect of the two simultaneous agitations of the rope would be to produce no apparent vibration. Now the light from one slit reaches the screen in a phase of vibration opposite to that of the light from the second slit, so that when the two vibrations are superimposed upon the same spot in the ether they neutralize each other.



We are extremely sorry to announce the death of Dr. Granville Waller, Louisville, Kentucky. He will be greatly missed by his associates and many of his patients whom he benefited by the ERA method of treatment.

CLINICAL LECTURES (Continued)

Re-examination. "Woman. Age 23 years. About 2 years ago began to have bloody urination. No pain; no frequency; no relation to menstrual periods. Urine examined. Showed blood and pus casts. X-ray showed shadow in left kidney. Was operated on in July, 1922, to remove supposed stone, but none was found. Pain in region of left kidney, dragging in character and at times very severe. Causes patient to become nauseated. Losing weight. No pep." First examination we found Sarcoma; 7 ohms; non-metastatic; left kidney. Tuberculosis; 4/25 of an ohm. Congenital Syphilis measured 36 ohms. Congenital Neisserian was present. See what the Sarcoma measures today. Set it at 58 for Sarcoma. Still present. 6/25 of an ohm. Continue same treatment.

CARCINOMA, DUODENUM — PAIN IN EPIGASTRIUM

Clinic Case. Man, age 50 years. Married; no children. Pain in epigastric region burning in character. May come on one hour after eating. Used to be relieved by taking sodium bicarbonate; now has no effect. Much gas. Not much loss in weight. Generally weaker. No pep. Tired all the time. No abdominal operations. Urine not examined lately.

First Examination: **Carcinoma; duodenum; non-metastatic; 9 ohms. Congenital D. R.; 34 ohms.**

He has had only 14 treatments. Let me see today's report. "Pain in abdomen, left side of epigastrium, not much better. Feels good and bad from day to day in an irregular manner. Using milk products; malted milk, Mellon's Food, three soft boiled eggs daily." We will see what the Carcinoma measures today. Put his blood in. Set the instrument at 50. We are looking for Carcinoma. Yes, it is still present. How much does it measure? Two ohms. Try 3. No. Check me up. The **Carcinoma measures 2 ohms.** That is considerable reduction. Have him come in. (Patient comes in.) Your condition is improving. Go right on with your treatments. You may have some distress after we get through because of a mechanical disturbance. Nothing ever gets quite well, you know. Continue the same treatment. The reaction is not quite gone.

CARCINOMA, CERVICAL REGION — STREP. INFECTION

Clinic Case. Married woman, age 38 years. All three children living and well. Pain aching in character situated at region of first cervical vertebra. Radiates to side of neck. Pain in this region is more or less constant during entire day. Sleeps well. Appetite good. No digestive disturbance. Tonsils removed. Some teeth removed but no relief.

First examination: **Carcinoma; present; bone; cervical region; non-metastatic; 5 ohms.** Sarcoma; Acquired D. R.; Strep.; and Tuberculosis are all negative. **Congenital D. R.; 30 ohms plus.**

Second examination three weeks later, daily treatments one hour each: **Carcinoma; 1 ohm. Congenital D. R.; 12 ohms; left tonsillar region, back of neck and right antrum.**

Third examination, one week later: **Carcinoma and Sarcoma; negative. Strep.; present.**

Let us see what treatment she has been having. The **treatment** has been one cord at rate 3 and two cords at rate 6 to the neck. Later she had treatment for Strep. Have her come in. (Patient comes in.) You are still having pain in the back of your neck?

Patient: Yes, I have.

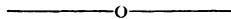
Doctor Abrams: Is it as bad as when you first came?

Patient: No, it is better than when I first came, but it still bothers me some at times.

Doctor Abrams: It is a curious thing; a patient is never better as long as he has any symptoms remaining. Everything is relative. We are all the same way; we fail to make comparisons. Now, this little lady is unquestionably very much better. I remember her condition very well when she first came. She is sensitive and nervous and any change in climatic conditions is registered by her organism. But, you know you can not have such a chronic condition for so long and not expect to have some mechanical disturbance remaining. They expect too much. You must have patience, little lady. I know; I don't blame you for wanting to get rid of that pain; and we will do the best we can. Please go outside and we will examine the blood and you can come in later. (Patient goes out.)

See if there is any Carcinoma present. Set it at 50. There is no reaction. Try Congenital, 57. I get nothing. See if there is any Cryptogenic present. Set it at 45, please. Yes, there is still some. Is there any Staph. infection? Put it at 34, Doctor. There is no Staph. Try 60 for Strep. Yes, do you all hear it? **Where is the Strep? In sinus and tonsillar regions.** We will go over her when she comes in. That's all. Have her come in. (Patient comes in.) We have found a condition that probably accounts for the continued presence of pain in your neck. There is always a reason. A patient never complains without a cause. No one wants to be sick. Go over the sinuses for Strep.

Strep. is present in right antrum and left tonsillar region. Go over the back of the neck where she has the pain. You see we get the reaction of Strep. in the cervical region. Is it from the sinus or the tonsils? It is of left tonsillar origin. She has had her tonsils removed but the peritonsillar tissue still forms a focus of infection. We will see if we can not get rid of this condition. The patient doesn't care anything about the reactions. What she is interested in is getting better. Very good. **Treatment:** Use two cords at rate 2 to left tonsillar region and one cord at rate 2 to right antrum. It will probably take 10 or more treatments.



REPORT OF CASE OF TUBERCULOSIS OF LUNGS

Doctor Abrams: Doctor Shanks has some interesting cases to report. You may tell us about them briefly. I am sure the doctors would be

interested in hearing about them. But be sure and tell the bad as well as the good. We learn as much from our failures as from our successes; probably more.

Doctor Shanks: This is a case of a man with Tuberculosis of the lungs of 19 months' standing. He had lost 60 pounds in weight and had had 50 hemorrhages. Temperature from 100 to over 105. He has been taking treatment 3 months. It came down and was normal for one week. It has gone up since then. The patient has gained 15 pounds even though he has had fever most of the time. He is feeling fine. He could hardly walk when he started taking treatment. Now he walks up two flights of stairs. There are big cavities in both lungs, but he is looking and feeling better. I can not hope that he will get well. The reaction of Tuberculosis is almost gone. The cough and expectoration are not one-half what they were.

Doctor Abrams: Those are desperate cases. You should be congratulated on getting results. There may be a mixed infection that accounts for the continued fever. You may find a Strep. or Staph. infection of the lung. That is harder to get rid of than the Tuberculosis. But there are cases apparently hopeless whose lives have been prolonged. You must insist that the patient live out of doors and sleep outside. That is imperative if you wish to get results in Tuberculosis.

RESULTS IN PSORIASIS — REACTION OF PSORA

Mail Specimen. This is a re-examination. What is the history? "Patient improving of Psoriasis. All other ills subdued, which makes him a happy man." We have not had much success in Psoriasis, but some of the men have been getting good results. At the last examination Cryptogenic D. R. was negative. Try 45, Cryptogenic D. R. There is no reaction. See if we can get a reaction of Psora. Yes, **Psora is present.** Write to the Doctor: "Would advise S S 5 for treatment of Psora."

SARCOMA, INTESTINES—SYMPTOMS, SHARP PAINS AND VOMITING

Mail Specimen. Woman, age 46 years. Eighteen months ago began to feel tenderness in transverse colon complicated with vomiting. Vomiting has lessened but tenderness and some sharp pains continue. More or less constipated. Fairly well nourished.

Give me 49 first, Doctor. We always use that, especially for outside specimens, as a matter of precaution. Never take any chances. It is human blood. Try Carcinoma. No reaction. Give me 58, Sarcoma. Reaction of **Sarcoma; present; non-metastatic; to the left and above naval; 6 ohms.** You can see the area of pallor in that region. Sarcoma seems to show up more conspicuously than Carcinoma. See if there is any 55. No, I get no reaction of Acquired D. R. Of course we will get the reaction of **Congenital D. R.** Measure it. It is 23 ohms. Try 24. Check me up. 23 ohms is correct. Always check up to be sure. You can not be too careful.

METASTATIC CARCINOMA, PELVIC CAVITY AND INGUINAL REGION

Clinic Case. Married woman; age 57 years. Had measles and whooping cough in childhood. Tonsillitis. Influenza in 1921. Ovarian cyst removed in 1904. She was treated four months ago by a physician who said she had a cancer. Douching stopped discharge. Cervical tear at childbirth. No loss of weight. Good appetite. There is a small lump in vaginal wall. Slightly tender at times.

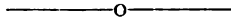
Give me 49 at first. We know the blood is all right because it was taken here. But it is a good thing to test out the reactions by beginning with 49. You see we get the reaction for human blood. Try Carcinoma. **Carcinoma is present; pelvic cavity; metastatic; 7 ohms.** There is no Acquired D. R. Try **Congenital D. R.; present; 32 ohms.** (Patient comes in.)

Go over the suprapubic region for Carcinoma. There is no reaction. Now go over the vaginal opening from the outside. Now I get the reaction of 50. Go over the groin and inguinal region. Reaction of 50 over right inguinal region.

Treatment: Use vaginal electrode at rate 6. Avoid using vaseline if possible. Use one cord to right inguinal region at rate 6 and S S 3. Also use tampons of eosin very dilute. You have been worrying, haven't you?

Patient: Yes, I have. I have worried enough to get a cancer. I was told by three different physicians that I had a cancer.

Doctor Abrams: Do not worry. We will try to remove any tendency to any such trouble. We need all your co-operation and help so that you may get well, so just be cheerful and don't worry any more.



REACTION OF ACQUIRED D. R. OVER HEAD— NERVOUS BREAKDOWN

Clinic Case. No. 533. Man; age 33 years. Married; one boy living and well. Was patient here two years ago. Had about 10 treatments then and improved considerably. Complete nervous breakdown in 1911. Improved some then. Had another breakdown in 1915. Has not fully recovered since. Can not apply himself to any work. Lack of pep; exhausts easily. Appendectomy in 1909. Urine negative.

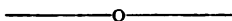
When he came here about 10 days ago we found **Acquired D. R.; present; over left side of head.** Treatment has been rate 3 to left side of head, three cords.

Present Report: "Stronger and better in every way. Feels much better when he can have outdoor work."

Put his blood in and we will see if there is any Acquired D. R. present. There is no reaction of 55. Try Cryptogenic D. R., 45. Do you all hear it? You see, there is still a reaction of **Cryptogenic D. R.** Where is it? It is in the brain. (Patient comes in.) How are you feeling?

Patient: I feel very much better. I am improving right along.

Doctor Abrams: That's good. Go over his head for 55. **Reaction of Acquired D. R. is present on left side of head.** Continue to concentrate the treatment on the left side of head.



PUBLIC ATTITUDE TOWARD THE REGULAR PHYSICIAN — ONE PATIENT'S EXPERIENCE

Some time ago a questionnaire was sent out by a literary magazine with the object of ascertaining among influential people how many people employed regular physicians. According to my understanding, only thirteen and one-half per cent. of the people to whom the questionnaire was sent really employed regular physicians. To me it is the most astounding thing imaginable. It only proves either the inefficiency of medicine or that there is some truth in the charge that the public is becoming dissatisfied.

There are no cults in physics or mathematics because they are sciences. Medicine is very far from being a science.

As an example of the experiences of patients with various physicians, here is my friend, Mr. C——. He came here seven months ago. He had gone to one of our reputable specialists who told him that he had an epithelioma of the larynx and that an operation was absolutely imperative. He refused to be operated on and came to me. He had a very husky voice, difficulty in swallowing, and a constant sensation that something was in his larynx, although his general health was apparently unimpaired. We found no reaction of Carcinoma but found a reaction of 55. This reaction of Acquired D. R. entirely disappeared after a few weeks' treatment but there still lingers a little irritation which survives over a sensitive part like the larynx. I told him, however, that he must put up with it and consult anybody he desired. He went to a physician who said, "You will have to go to the hospital the first thing in the morning and be operated on." Several consultants were employed, and the consensus of opinion was to the effect that he had a cancer that would demand immediate operation and they gave him no hope. That was three months ago. He refused to be operated on and returned to me. I found no reaction of Carcinoma but found Scar Tissue. I gave him treatment with the Microoscilloclast and the patient said he could see improvement right away. I had my assistant examine his throat very carefully and he found it absolutely normal. (To the patient.) How do you feel about the opinion of the physicians?

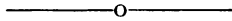
Patient: I have no faith in their opinion. They told me they could not use the knife because it was down too far. They could not use radium but they would use X-ray which would create a swelling and then they could open it up, but my chances they said were very small.

Doctor Abrams: However, it is not the fault of the physicians for they have no means of making a diagnosis that can be relied on. I merely wanted to show the parlous state of medicine at the present time and the

unwillingness to progress along new lines. We will go over his larynx again just to be sure. Give me his history.

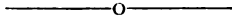
"Married man, age 58 years. Had Neisserian over 30 years ago. Was treated for lues 30 years ago. Salvarsan 4 years ago. Present trouble sore throat." At the first examination, March 16, 1923, we found **Acquired D. R.; 16 ohms; larynx.** On April 9, 1923, the Cryptogenic D. R. was negative. **Strep. was present in left tonsillar region.** On August 9, Carcinoma; Sarcoma; Acquired D. R.; Cryptogenic D. R.; and Tuberculosis were all negative. **Scar Tissue was present in the larynx.** Treatment with the Microscilloclast gave good results at once.

We will see what we find today. Carcinoma is negative. Acquired D. R. is negative. **Scar Tissue is still present.** Continue same treatment.



MEDDLESOME MEDICINE

Meddlesome midwifery is bad, and meddlesome medicine is equally bad. There are patients who are quite comfortable but are made worse by physical examination. It always reminds me of the Italian epitaph. "I was well; I wanted to be better. I went to see a physician; I became sick; I died."



DECEIVING THE SENSE OF DIRECTION

Here is an experiment to show you how deceptive the sense of hearing is. I will have one of the doctors turn his back to me and shut his eyes. Stand right here, Doctor, and keep your eyes shut. Now I am going to click these coins together and I want you to point toward the direction from which the sound appears to come. Where does that sound come from? (The doctor indicates a point to the right when the noise was made back of the head.) Try it again. We will make several tests. That will do. You all saw how he was completely deceived as to the direction of the sound. This shows how unreliable the senses are. With his vision obscured he was unable to determine even so simple a matter as the direction of sound. The mental vision also can be so blinded by preconceived opinions that the individual can actually not rely upon his mind or senses to register correctly the results of a scientific experiment. You have all seen this happen many times. It is much easier to hoodwink a group of professors than it is a bunch of children. A magician once told me that he always requested the most learned scientists to investigate his performances because he had found them least capable of discovering his tricks. It is very hard to fool a child. The reason is because the educated man has so many preconceived notions already fixed in his mind that he thinks he knows exactly what will happen and why. The child, on the other hand, with his mind open and senses alert is able to follow each move of the experimenter. Observation is a very rare art. We see what we want to see or what we think we are going to see or should see, not what actually happens.

When I was a child my father trained me to be observing. When we walked past a shop window he would have me name all the objects I had seen in it. At first I could remember only a few, but in time I was able to see a whole windowful at a glance. It is a splendid method of training a child. Most people observe nothing. They look at things but do not see anything. A physician should cultivate especially the art of observation. Instead of devoting so much time to the study of medicine it would be a good thing for a physician to be trained to be a detective. All of you doctors see this work performed hundreds of times and yet if I should ask one of you just how to connect up the apparatus for an autoelectronic diagnosis, for example, I'll wager not one of you could do it correctly. It looks simple until you try to do it alone. First make a diagram so you will know what you are doing and then practice doing it. How do you expect to get along when you go out if you can't do those simple things?

—O—

REACTION OF ACQUIRED D. R. OVER ABDOMEN — HISTORY OF VOMITING

Clinic Case. Married woman, age 46 years; married 28 years. Always well up to 8 months ago when she lost her appetite, became dizzy and food began to regurgitate. Bowels all right. Lost 40 pounds. Now weighs 145 pounds. Operated three months ago for cyst in abdomen. Vomited once or twice a day for the past 2 months.

First give me 49 for human blood. You see his reactions are pretty good. Now we will look for Carcinoma. No reaction. Try 58, Sarcoma. Negative. Look for 55, Acquired D. R. Do you all hear that? **Acquired D. R. is present.** This woman may have had a mass which was Acquired Syphilis and not Carcinoma. Have her come in. (Patient comes in.) How much did you lose in weight?

Patient: I lost 40 pounds.

Doctor Abrams: Did they operate?

Patient: Yes, they found a cyst and drained it. I have no pain but I am sick at my stomach.

Doctor Abrams: Go over the abdomen for 50. There is no reaction. Try 58 for Sarcoma. No reaction. Now try 55. Yes, we get the reaction of Acquired D. R.

Treatment: She is to get general treatment, S S 3; and two cords at 3 over the whole abdomen. At least two hours a day until she is better. (Patient goes out.)

A doctor just called my attention to the fact that we did not get a reaction of Carcinoma or Sarcoma although she had had an operation. When the operation is very recent, we do not always get the reaction of malignancy. She was operated three months ago and it evidently has not had sufficient time to develop. Another instance when we do not get the reaction of malignancy following an operation is when there is no syphilis present. Of course the latter condition is rare unless the patient has had ERA treatment.

SARCOMA, RIGHT KIDNEY

Clinic Case. No. 8. Married woman, age 57. Married twice. Had pain in right flank for 6 years when she was operated on in 1915 and five kidney stones were removed. Had pains in back for 7 years. Now has sharp pain in either side and in knees and shoulders. Pains trouble her sleep at times. Much trouble with gas in stomach and abdomen. Easily fatigued.

First give me 49 even though the blood was taken here. Do it to make sure of the reactions, especially when the reactions are tardy. When the reflexes become exhausted the reactions are tardy and you must be sure to work more slowly and carefully. I am inclined to work too rapidly. As you do more and more of this work you are inclined to become more careful instead of more careless. In the early days I worked very rapidly and no doubt made many mistakes. Of course I make mistakes now; we all do. A man who makes no mistakes makes nothing else. But it is possible to eliminate the percentage of error to a great degree by checking up in various ways.

Try Carcinoma. It is negative. Give me Sarcoma. **Sarcoma is present.** Where is it? It is **genitourinary; non-metastatic; 6 ohms.** Acquired D. R.; negative. **Congenital D. R.; present; 28 ohms plus.**

(Patient come in.) Go over the kidney region for 58. The reaction is present over right kidney. Check me up. Go over it without my knowledge. Correct. Where is your pain?

Patient: Sometimes on the right and sometimes on the left side.

Doctor Abrams: We find some trouble in the right kidney. Use three cords at rate 3 over the right kidney.

Microoscilloclast of Dr. Albert Abrams

This attachment used in connection with the Oscilloclast enables one to increase the efficiency of the latter fully 100%. Thus in syphilis, the reactions which are usually negatived in from four to eight weeks may become so after several days treatment. One uses the usual number on the Oscilloclast and carries the energy with a cord to the microoscilloclast which is set at a definite rate for each disease. From the latter the energy is conveyed to the patient in the usual way. The best results are attained when three cords from the binding posts of the oscilloclast are used and connected to the microoscilloclast with a triple connector. This is advisable inasmuch as only one oscilloclast rate can be used with the microoscilloclast. Its use is indicated in desperate cases and in those requiring immediate relief. For this reason several microoscilloclasts should be ordered.

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DR. H. W. WIRKLICH, Editor.

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