

**Medical Matters.****SUICIDE.**

A SOMEWHAT novel theory of the reasons for suicide has recently been advanced with much ability. It is argued that mental depression and melancholia are due to defective circulation in the brain; and that this is due to the blood being rendered impure by the presence of uric acid, and that this uricacidæmia or collæmia is the result of error in diet, and can be controlled or removed by altering it. The great preponderance of suicides in males may be due to several factors. Men are more exposed to weather than women, and exposure may be equivalent to living in a colder climate. Men eat more often and much more meat than women. Women excrete large quantities of uric acid every month, so that, other things being equal, they will have less retention and accumulation than men; this monthly excretion accounts for the fact that when they do commit suicide it is often at the monthly period. Again, women suffer much less than men from gout on the one hand and from stone and gravel on the other. In just the same way life fluctuations explain why women suffer more than men from 15 to 20 years of age. The uric acid stored or retained in the rapid nutrition of girls about 13 or 14 years, which comes to an end at about 16 or 17 years, passes through the blood about and after these latter ages, and accounts for the blood and circulation changes which end in chlorosis, headaches, depression, epilepsy, and suicide. The opposite side of this picture is the rapid nutrition and retention of uric acid at 13 years with the acute rheumatism it produces; in such girls we often get a complete alternation, rheumatism and anæmia, with headache, epilepsy depression, and suicide as more occasional co-results.

**WHITE AND BROWN BREAD.**

AN interesting and important article has recently been published by two well-known English physicians on the relative digestibility of white and brown bread. On the strength of certain experiments, they feel justified in concluding that the higher nutritive value which might on purely chemical grounds be ascribed to brown bread cannot be maintained from the

physiological side. As to fats and mineral constituents on the other hand, distinctly less of the nutritive materials actually get into the blood in the case of brown than of white bread. White bread is, weight for weight, more nutritious than brown. It thus would appear that the preference given by operatives in large towns has, to a certain extent, a sound physiological basis. In the case of people with irritable intestines, white bread is to be preferred to brown. In the case of people with sluggish bowels, brown bread may be preferred to white, as it tends to maintain peristalsis, and insures regular evacuation of the bowels. If the proportion of mineral ingredients, and especially of lime salts, in other articles of food or drink be inefficient, brown bread is preferable to white. It is possible that in the case of operatives living chiefly upon bread and tea, the preference for white bread which prevails may be responsible, in part at least, for the early decay of the teeth. An abundant supply of mineral constituents is especially required in pregnant and suckling women and growing children, in order to supply material for the nutrition of the foetus, for the constituents of the milk and for the growth of the tissues, especially the bones. In such cases, if mineral salts, especially those of calcium, be supplied by other foodstuffs, drinks, or medicines, brown bread is preferable to white. The observers, referred to, believe that if the dietary be insufficient in fat, or if the patient be unable to digest fat readily in other forms, brown bread may possibly be preferable to white. They dwell on the absurdity of taking the mere chemical composition of a foodstuff as an index of its nutritive value. "A stick of charcoal, the atmospheric air, a little water, and some sea salt contain all the elements of a typical diet, and in ample quantity." Hence it is not always a question of what a foodstuff contains, but how it contains it.

**PORRIDGE.**

The attention which has recently been called to the remarkable digestibility of porridge recalls the story of an English practitioner who, after a year's residence in a Scotch village, retired in disgust, and explained his failure to an English friend as follows:—What chance of a living has a doctor amongst people who put poultices into their stomachs night and morning?

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