EXERCISE

By G. G. JALNAWALA, Health Visitor

[The opinion of the writer of this article is controversial, and it would be interesting to print letters from members on the subject.]

Exercise is believed by many to be a necessary adjunct of weight reduction. After forty years of age, many persons tend to add weight, and there is much evidence to show that such increase in weight is not conducive to continued health. These people should reduce their weight gradually to a normal level for their height, age and sex. This is to be accomplished by eating less in amount and particularly less of sugars, starches and fats. It is entirely possible to lose weight gradually on a balanced diet. Rapid loss of weight is undesirable; one pound a week is an optimal loss. No medicines of any sort should be included in a weight-reducing regimen. Various products advertised to remove local accumulations of fat are pure "boloney". Except for the prize-fighter or jockey, exercise is not advisable for loss of weight. Unless exercise produces vigorous sweating, it has little effect on weight, and even then the loss is rapidly regained if water is drunk freely. Exercise increases appetite which makes it more unpleasant to eat less. Furthermore, exercise for fat people is often harmful, for these persons are not accustomed to much activity, and thus exercise puts an undesirable strain on them. They are in no physical condition to undergo exercise vigorous enough to influence their weight. Moderate body activity, short of causing fatigue, is desirable for all, but this is entirely different from what is usually meant by "exercise". When past forty, beware of vigorous exercise, especially you who up to then have led sedentary lives. Those who have exercised regularly and kept in training may be allowed to continue this practice, but even they should reduce their exercise as the years advance.

Many, when younger, exercised vigorously and participated in competitive games, but they try to keep up such activity as they grow older and often do themselves injury. The temptation to keep on is great. It is a sad sight to see older men or women returning from tennis courts or golf links, weary of foot, drawn in expression, their faces flushed or ashen, foolishly proud to be able to declare that at sixty, let us say, their activities are unabated. These people lack either the sense or the courage to admit that they are growing older and that activity is becoming increasingly fatiguing. They persuade themselves that such exercise is necessary for their well being. In fact, a progressive decrease in bodily exertion is what they need.

Most harmful of all is periodic, irregular, vigorous exercise. Most pernicious is the habit of the week-end or all-day game of golf or other exercise, or the brief vacation with the days filled with incessant activity, often when the individual ordinarily leads a life nearly devoid of physical exertion.
Exercise, in kind and in amount suited to the age and bodily condition of the individual, may be wisely indulged in by those past fifty; but what exercise is permissible should be determined only after a careful and thorough study of the person by a physician who is conversant with the past habits of the individual. The physical director, the exercise cultist, and other such advisers, totally lack the requisite training and knowledge to determine what exercise is good for the over-fifty. The individual himself possesses a fairly good guide in his sense of fatigue, but this cannot be depended on in certain types of heart disease. At any rate, he may be sure that any exercise is too strenuous if it is followed by a restless night or any sense of fatigue the next morning. Here is a good rule to follow. If after an hour of relaxed rest, you are still conscious of considerable fatigue, next time shorten the amount or decrease the vigour of the exercise.

Present tendencies to make of exercise a fetish, in all probability contribute much to the premature breakdown of so many people. Various forms of heart failure cause more deaths in persons past fifty than any other cause. This makes it highly important to avoid the strain on the circulatory system that results from excess of exercise.

BACTERIOLOGY OF EYE-DISCHARGES OF THE NEWLY-BORN

In a recent article published as a result of his researches on the microbes found in eye-discharges of the newly-born, Dr. Pierre Labouguette, head of the laboratory of the Boulcucat Maternity Hospital, Paris, gives us some interesting details.

Among the microbes to be found in these discharges, from the ordinary blepharite to the serious conjunctivitis, the germ most to be feared is that of purulent ophthalmia, and it is of the greatest importance for the doctor and the midwife to be certain, as soon as possible, of the nature of the germ causing the suppuration. To sum up the question in a few words, we can say that laboratory examination revealing the presence of gonococci means a serious condition, but a laboratory test showing absence of gonococci or showing other microbes is a favourable sign. This does not mean that an eye which has gonococcus must be considered as lost, and an eye which has no gonococcus is necessarily a benign case. However, the presence of gonococcus is a serious danger signal. If the suppuration is effectively dealt with, and at once, the results are generally not serious, while, left to itself untreated, the discharge will have dangerous results.

In many of the samples of eye-discharge examined, there were no microbes either on immediate examination or in the culture, in spite of the presence of more or less pus. This suppuration is not of microbial but of caustic origin. The usual cause is the use of too-concentrated a solution of silver nitrate or of a solution of correct strength but too old. The best proof of this is the