

A POPULAR TREATISE ON COLDS AND AFFECTIONS OF THE AIR PASSAGES AND LUNGS pdf

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*A Popular Treatise On Colds and Affections of the Air Passages and Lungs [Robert Hunter] on www.enganchecubano.com *FREE* shipping on qualifying offers. This is an EXACT reproduction of a book published before*

THE progress of the healing art, as distinguished from certain sterile branches of medical science, can be best measured by the progress of our insight into the causes of special maladies. For the accidental discovery of a "specific" means generally nothing but the discovery of a method for suppressing special symptoms of a disease. Quinine subdues chills, but does not prevent a relapse of febrile affections; brandy neither cures nor subdues dyspepsia, but merely interrupts it with a transient alcohol-fever. That "colds," or catarrhal affections, are so very common—so much, indeed, as to be considerably more frequent than all other diseases taken together—is mainly due to the fact that the cause of no other disorder of the human organism is so generally misunderstood. Few persons have recognized the origin of yellow fever; about the primary cause of asthma we are yet all in the dark; but in regard to "colds" alone the prevailing misconception of the truth has reached the degree of mistaking the cause for a cure, and the most effective cure for the cause of the disease. If we inquire-after that cause, ninety-nine patients out of a hundred, and at least nine out of ten physicians, would answer, "Cold weather," "Raw March winds," or "Cold draughts," in other words, out-door air of a low temperature. If we inquire after the best cure, the answer would be, "Warmth and protection against cold draughts."i. Now, I maintain that it can be proved, with as absolute certainty as any physiological fact admits of being proved, that warm, vitiated indoor air is the cause, and cold out-door air the best cure, of catarrhs. Many people "catch cold" every month in the year and often two or three times a month. Very few get off with less than three colds a year; so that an annual average of five catarrhs would probably be an underestimate. For the United States alone that would give us a yearly aggregate of two hundred and fifty-five million "colds. For, as a test of our unbiased faculty of observation, the degree of that failure would lead to rather unpronounceable conclusions. What should we think of the scientific acumen of a traveler who, after a careful examination of the available evidence, should persist in maintaining that mosquitoes are engendered by frost and exterminated by sunshine? Yet, if his attention had been chiefly devoted to the comparative study of mosquito-ointments and mosquito-bars, he might, for the rest, have been misled by such circumstances as the fact that mosquitoes abound near the ice-bound shores of Hudson Bay, and are rarely seen on the sunny prairies of Southern Texas. In all the civilized countries of the colder latitudes, catarrhs are frequent in winter and early spring, and less frequent in midsummer: Yet of the two fallacies the mosquito theory would, on the whole, be the less preposterous mistake; for it is true that long droughts, by parching out the swamps, may sometimes reduce the mosquito-plague, but no kind of warm weather will mitigate a catarrh, while the patient persists in doing what thousands never cease to do the year round, namely, to expose their lungs, night after night, to the vitiated, sickening atmosphere of an unventilated bedroom. Frost is such a powerful disinfectant that in very cold nights the lung-poisoning atmosphere of few houses can resist its purifying influence; in spite of padded doors, in spite of "weather-strips" and double windows, it reduces the in-door temperature enough to paralyze the floating disease-germs. The penetrative force of a polar night-frost exercises that function with such resistless vigor that it defies the preventive measures of human skill; and all Arctic travelers agree that among the natives of Iceland, Greenland, and Labrador pulmonary diseases are actually unknown. Protracted cold weather thus prevents epidemic catarrhs, but during the first thaw [1] Nature succumbs to art: But where and when? Last evening, probably, when the warm south wind tempted them to open the window for a moment. Or "when those visitors kept chatting on the porch, and a drop of water from the thawing roof fell on my neck. Resolved, that a person can not be too careful, as long as there is any snow on the ground. But even that explanation fails in spring; and, when the incubatory influence of the first moist heat is brought to bear on the lethargized catarrh-germs of a large city, a whole district-school is often turned into a snuffling-congress.

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The latter part of March is the season of epidemic colds. The summer season, however, brings relief. In the sweltering summer nights of our large sea-board towns the outcry of instinct generally prevails against all arguments of superstition; parents know that their boys would desert and sleep in a ditch rather than endure the horrors of an air-tight sweat-box; so the windows are partially-opened. The long, warm days also offer increased opportunities for out-door rambles. In midsummer, therefore, Nature rallies once more. There are people whose prejudices can not be shaken by experience, and in their households a perennial system of air-poisoning overcomes the redeeming tendencies of out-door life, as the subtle mixtures of La Brinvilliers overcame the iron constitution of her last husband. Their children snuffle the year round; no cough-medicine avails, no flannels and wrappers, even in the dog-days; and the evil is ascribed to "dampness," when the cold-air theory becomes at last too evidently preposterous. To an unprejudiced observer, though, that theory is equally untenable in the coldest month of the year. No man can freeze himself into a catarrh. In cold weather the hospitals of our Northern cities sometimes receive patients with both feet and both hands frozen, with frost-bitten ears and frost-sore eyes, but without a trace of a catarrhal affection. Duck-hunters may wade all day in a frozen swamp without affecting the functions of their respiratory organs. Ice-cutters not rarely come in for an involuntary plunge-bath, and are obliged to let their clothes dry on their backs: Prolonged exposure to a cold storm may in rare cases induce a true pleural fever, a very troublesome affection, but as different from a "cold" as a headache is from a toothache—the upper air-passages remain unaffected. Sudden transition from heat to cold does not change the result. On my last visit to Mexico, I ascended the peak of Orizaba from the south side, and reached the crater bathed in perspiration; and, following the guide across to the northwest slope, we were for ten minutes exposed to an ice-storm that swept the summit in blasts of fitful fury. Two of my companions, a boy of sixteen and an old army-surgeon, were not used to mountain-climbing, and could hardly walk when we got back to our camp in the foot-hills, but our lungs were none the worse for the adventure. Franklin, who, like Bacon and Goethe, had the gift of anticipative intuitions, seems to have suspected the mistake of the cold-air fallacy. Page, "and have then attended to my out-door affairs, minus the overcoat habitually worn; I have slept in winter in a current blowing directly about my head and shoulders; upon going to bed, I have sat in a strong current, entirely nude, for a quarter of an hour, on a very cold, damp night, in the fall of the year. These and similar experiments I have made repeatedly, and have never been able to catch cold. I became cold, sometimes quite cold, and became warm again, that is all" "Natural Cure," p. There are many ways, less often sought than found, for "becoming quite cold, and warm again," but an experimenter, trying to contract a catarrh in that way, would soon give it up as a futile enterprise; after two or three attempts he would find the attainment of his purpose more hopeless than before; he would find that, instead of impairing, he had improved the functional vigor of his breathing-apparatus. Cold is a tonic that invigorates the respiratory organs when all other stimulants fail, and, combined with arm-exercise and certain dietetic alteratives, fresh, cold air is the best remedy for all the disorders of the lungs and upper air-passages. In case imperative duties should interfere, the enemy must be met after dark, by devoting the first half of the night to an out-door campaign, and the second half to an encampment before a wide-open window. If the fight is to be short and decisive, the resources of the adversary must be diminished by a strict fast. Denutrition, or the temporary abstinence from food, is the most effective, and at the same time the safest, method for eliminating the morbid elements of the system; and there is little doubt that the proximate cause of a catarrh consists in the action of some microscopic parasite that develops its germs while the resistive power of the respiratory organs is diminished by the influence of impure air. Cold air arrests that development by direct paralysis. But, aided by exercise, out-door air of any temperature will accomplish the same effect. In two days a resolute pedestrian can walk away from a summer catarrh of that malignant type that is apt to defy half-open windows. But the specific of the movement-cure is arm-exercise—dumb-bell swinging, grapple-swing practice, and wood-chopping. As the chest begins to heave under the stimulus of the exercise, respiration becomes freer as it becomes deeper and fuller, expectoration ceases to be painful, and the mucus is at last discharged en masse, as if the system had only waited for that amount of encouragement to rid itself of the

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incubus. A catarrh can thus be broken up in a single day. For the next half-week the diet should be frugal and cooling. Fruit, light bread, and a little cold, sweet milk, is the best catarrh-diet. A fast-day, though, is still better. Fasting effects in a perfectly safe way what the old-school practitioners tried to accomplish by bleeding; it reduces the semi-febrile condition which accompanies every severe cold. There is no doubt that by exercise alone a catarrh can gradually be "worked off. A combination of the three specifics—exercise, abstinence, and fresh air—will cure the most obstinate cold; only, the first signs of improvement should not encourage the convalescent to brave the atmosphere of a lung-poison den. So-called chronic catarrhs are, properly speaking, a succession of bronchial fevers. The popular idea that an average "cold" lasts about nine days, has some foundation in truth. Like other fevers, catarrhs have a self-limited period of development, but the recovery from the first attack constitutes no guarantee against an immediate relapse; on the contrary, the first seizure appears to prepare the way for its successors. A long sojourn in an absolutely pure atmosphere, as in a summer camp on the mountains, seems for a while to make the lungs catarrh-proof, by increasing the vigor of their resisting ability, and the returned tourist may find to his surprise that the air of his family den can now be breathed without the wonted consequences. But the addition of a stove or a double window at last turns the scales against Nature, and the first malignant cold reproduces the sensitiveness of the respiratory organs. After recovery from a chronic catarrh the danger of contagion should therefore be carefully avoided. In many of our Northern cities ill-ventilated reading-rooms are veritable hot-beds of lung-poison, as crowded court-rooms in the villages, and taverns and quilting-assemblies in the backwoods. Meeting-houses, with their large windows and small, rarely-used stoves, are less dangerous; but stuffy school-rooms are as prolific of colds as swamps of mosquitoes, and often counteract all sanitary precautions of the domestic arrangements. Stuffed railway-cars, too, could claim a premium as galloping-consumption factories; and after dark the retreat to an over-heated "Pullman sleeper" would hardly increase the chances of longevity; the best plan for long-distance travelers would, on the whole, be to secure a rear seat, where open windows are less apt to awaken the groans of air-fearing fellow-passengers, and risk cinders and smoke rather than the miasma of the galloping man-pen. It would be a mistake to suppose that "colds" can be propagated only by direct transmission or the breathing of recently vitiated air. Catarrh-germs, floating in the atmosphere of an ill-ventilated bedroom, may preserve their vitality for weeks after the house has been abandoned; and the next renter of such a place should not move in till wide-open windows and doors and a thorough draught of several days has removed every trace of a "musty" smell. If a bronchial catarrh is accompanied by a persistent cough, it indicates that the affection is deep-seated, and that it has probably spread to the upper lobes of the lungs. Arm-exercise and a mild, saccharine diet generally suffice to loosen the phlegm and thereby remove the proximate cause of the evil. But, if those remedies fail, there is a presumption that the chronic character of the affection is due to a permanent external cause of irritation, which can be removed only by a change of air. In such cases cough-sirups merely palliate the evil. Medicines, counter-irritants, and fasting are in vain, if the lungs of the patient are constantly impregnated with new morbid germs; even exercise can do little more than alleviate the distress of the symptoms; a radical cure is impossible as long as every night undoes the work of the preceding day. In a home of prejudices the patient should at once change his bedroom and take care to profit by the change. A neglected catarrh may result in an attack of pleurisy. Each lung is inclosed in a sack-like serous membrane, which connects with a similar membrane lining the inner surface of the chest. This double integument, known as the pleura, or the visceral and parietal layer of the pleural membrane, communicates both with the lungs and with the upper air-passages, and is more or less affected by every morbid condition of the respiratory organs. Pleurisy, or the congestion of the pleural membrane, is generally an inflammatory complication of a chronic catarrh. The original affection may have apparently subsided. Counter-irritants, alcoholic tonics, etc. A change of residence or plenty of out-door exercise may perhaps ratify the sham-cure. A normal pulse would give assurance that the masked fever has really subsided. But under less favorable circumstances an oppressive heat and a strange feeling of uneasiness will some day announce the approaching crisis of the latent disorder. Chills follow at shorter and shorter intervals, and at last

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a pricking pang in the region of the upper ribs reveals the seat of the affection. Breathing soon becomes so painful that the patient finds no rest in a horizontal position, but has to sit up in his bed, and may feel sorely tempted to relieve his distress by invoking the aid of the drug-gods. For believers in the remedial resources of Nature, pleurisy is, indeed, a crucial test of faith, and Dr. There was no danger in the symptoms, let them run as high as they would. They constituted no part of the real difficulty, but grew out of it. The general movement which made them necessary was aiming directly at the removal of that difficulty. Instead, therefore, of being troubled with the idea that I could not live with such symptoms, my conviction was very strong that I could live better with them than without them. From that time there was a gradual declension of painful symptoms, till the fifth day, when debility and expectoration constituted the bulk of the disease. After the paroxysm of the disease has subsided, the pectoral fever can be alleviated by the free use of cold water and strict abstinence from solid food. By a load of warm covers alone a common catarrh can be aggravated into a hot fever till the blanket-smothered patient is awakened by the throbbing of a galloping pulse. Exercise would promote the discharge of the accumulated serum, but, while the patient is too sore to turn over in his bed, gymnastics are out of the question, and their effect must be accomplished by "passive exercise," manipulation of the thorax, and a swinging motion in a hammock or a rocking easy-chair. With the aid of fresh air and abstinence the remedies of the movement-cure might be entirely dispensed with, if the accumulation of purulent matter were the only risk, but in acute pleurisy there is a greater danger from another cause, namely, that the inflamed surface of the visceral pleura has a tendency to adhere to the lining of the thorax and thus obliterate the pleural cavity.

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2: Diseases of the Throat and Nasal Passages

A Popular Treatise on Bronchitis Embracing Bronchial Consumption, Hooping-Cough, and Asthma, Their Nature, Causes, and Treatment by Robert Hunter The Nature, Causes, Symptoms, and Cure of Diseases of the Throat and Lungs The Differences Between Bronchitis, Clergyman's Sore Throat, and Consumption by William Whitty Hall.

Rhino-laryngopharyngitis, especially bronchitis and whooping cough at all stages. Effective expectorant in chronic bronchitis, bronchial asthma, fits of coughing in phthisis. Strong soothing effect, secretor and antiseptic due to its phenol and turpentine components, sedative on account of its contents of Flores Rhoeados. Mobilization of the defensive elements of the organism by the additional use of active homeopathic ingredients with organo-tropic effects on the mucous membranes of the upper air passages. Excoriating discharge from nose. Catarrh worse at night. Convulsive cough attack, hollow and barking cough, dry mucous membranes. Harsh and dry cough with pain in chest. Hypersensitivity of the mucosa of the pharynx. Spasmodic cough with viscous glary expectorations. Violent attack of convulsic cough with choking fit. Spasmodic cough, viscous mucus, dyspnea. Convulsive cough with cyanosis and suffocation, spasmodic asthma. Active substance from Ma-Huang effective colds, asthma and hay fever. Dry asphyxiant cough with glottis spasm, nausea and emesis. Affluent nasal discharge with color, swallowing difficulty. Painful larynx, congestion of lungs, tightness across chest. Hollow cough, cough at night. Colds down from the nose to the pharynx and trachea, followed by bronchitis. Pressure on the root of the nose. Thymic tissue nutrient support for lungs. In the beginning of the treatment frequent doses, every hour drops in some water, or one teaspoon of syrup. It is advisable to alternate from hour to hour the cough syrup and the cough drops. After attenuation of the graveness and frequently of the fits of coughing generally in days take the medicine every hours. In the treatment of non-specific catarrh, following whooping cough, take times daily drops in some water, or one teaspoon of syrup. Acute bronchitis and Laryngo-pharyngitis: Every two hours drops or one teaspoon of syrup. This medicine may be taken by everybody, even by babies. In bronchitis and laryngo-pharyngitis. Check also MB 6, 48, In influenza, use also MB 6.

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3: Study: Lavender Essential Oil has Anti-inflammatory Effect on Asthma

A Popular treatise on colds and affections of the air passages and lungs Item Preview.

It causes a cough, shortness of breath and chest tightness. Coughing often brings up yellow or greenish mucus. There are two main types of bronchitis: Bronchitis is inflammation of the large airways that branch off the trachea bronchi, usually caused by infection but sometimes caused by irritation from a gas or particle. Bronovil Natural Bronchitis Remedy Fast natural cure for bronchitis. Formulated to Help Support: Prevent virus from attacking your lungs Relieve lung inflammation Naturally relieve pain and fever Breathe easier Feel stronger in no time Great Product Smoking can also be dangerous for unborn children. Mothers who smoke are more likely to suffer from miscarriages, bleeding and nausea, and babies of smoking mothers have reduced birth weights or may be premature. These babies are more susceptible to sudden infant death syndrome and may also have lifelong health complications due to chest infections and asthma. The cough may last for more than two weeks. Continued forceful coughing may make your chest and abdominal muscles sore. Coughing can be severe enough at times to injure the chest wall or even cause you to pass out. When the main air passageways in your lungs bronchial tubes are inflamed, they often produce large amounts of discolored mucus that comes up when you cough. If this persists for more than three months, it is referred to as chronic bronchitis. Almost everybody knows that smoking is bad for the health. Images of blackened lungs line school hallways and hospital waiting rooms, but despite this people continue to take up smoking. This may have to do with the pervasive romantic image of smoking -- an image that has nothing in common with reality. When a smoker inhales a puff of cigarette smoke the large surface area of the lungs allows nicotine to pass into the blood stream almost immediately. It is this nicotine "hit" that smokers crave, but there is a lot more to smoke than just nicotine. In fact, there are more than chemical substances that make up cigarette smoke and many of them are toxic. In the case of patients with status asthmaticus requiring treatment with mechanical ventilation, there may be complications of the mechanical ventilation, including disorders of the trachea or persistent bronchopleural fistula, which may require prolonged hospitalization or readmission Bronchitis is a respiratory condition where there is inflammation in the lining of the bronchial tubes which lead to the lungs. The illness that is commonly caused by viruses or bacteria can be termed acute bronchitis. Chronic bronchitis is caused by prolonged irritation of the lungs due to smoking or excessive exposure to harmful chemicals. Smokers have shorter lives than non-smokers. On average, smoking takes 15 years off your life span. This can be explained by the high rate of exposure to toxic substances which are found in cigarette smoke. COPD Chronic obstructive pulmonary disease is a respiratory problem that can cause long time issues for the patient in doing physical activity and normal breathing. Symptoms of Bronchitis Infectious bronchitis generally begins with the symptoms of a common cold: A slight fever ?? F may be present. The onset of cough usually dry at first signals the beginning of acute bronchitis. With viral bronchitis, small amounts of white mucus are often coughed up. When the coughed-up mucus changes from white to green or yellow, the condition may have been complicated by a bacterial infection. It is never too late to give up smoking, even those who have smoked for 20 years or more can realize tremendous health benefits from giving up the habit. There are many ways to take tobacco. You can chew it, inhale it through the nose, and smoke it in the form of cigars or cigarettes. What are the symptoms? For children, preventive measures need to be taught earlier. Kids need to know to cover their mouths when they sneeze or cough. They also need to continuously wash their hands. Kids also need a flu vaccine to help them fight any type of breathing problems. If the parents or grandparents can stop smoking, this would be beneficial for the children too. Preventive measures are always better than a cure. Parents who smoke need to remember that when they smoke so do their children who in turn also face health problems. There are two types of bronchitis infections: Followed by viruses, acute infections usually bother the nasal passages, sinuses, and throat and then going to the larger tubes. Sometimes bacteria cause the infection. Yours In Good Health Dr Carlo Rinaudo, Chiropractor Dr Carlo Rinaudo, Chiropractor, is a

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specialist in providing his patients and the general public with the very best and up-to-date information on all health related matters. Be sure to visit his central website Good Health Doctor, for a comprehensive collection on health related topics. There you will find information about diagnosis, treatment, causes and helpful articles and products. Abhishek is an ex-bronchitis sufferer and he has got some great tips for Bronchitis Treatment! Only limited Free Copies available. Bronchitis is a respiratory problem which can be found in the lower tract. It occurs when there is an inflammation of the airway tubes that include the trachea and larger air tubes that carry oxygen to the lungs. Cigarette smoke is composed of 43 carcinogenic substances and more than other toxins that can also be found in wood varnish, nail polish remover, and rat poison. All of these substances accumulate in the body and can cause serious problems to the heart and lungs. Familial emphysema, or alpha1-antitrypsin AAT deficiency-related emphysema, is caused by the hereditary deficiency of a protein called alpha1-antitrypsin. This deficiency leads to uncontrolled destruction of the alveoli and emphysema. Occupational exposure to dust, fumes, and gases appears to contribute slightly to lung function decline and chronic bronchitis. The role of air pollution in COPD remains controversial. In most cases, the same viruses that cause colds cause acute bronchitis. Research has shown that bacterial infection is a much less common cause of bronchitis than we used to think. Very rarely, an infection caused by a fungus can cause acute bronchitis. Until the infection is cleared, it progresses into a constant inflammation that can hinder the stream of air. It can also cause serious damage of the tract. There are simple ways that might help in the management of bronchitis: Avoid pollution by stopping smoking and avoiding smoke from other tobacco users, also avoid smoke polluted areas and wear a mask if needed. Use a vaporizer or humidifier to moisten the air. This helps loosen thick mucus and ease breathing. A warm water bottle or hot towel placed against your back or chest before sleeping may help decrease inflammation. Cold weather will usually aggravate bronchitis so it may help to cover your mouth and nose when outside in cold temperatures. Avoid using cough suppressants when possible because coughing is how you expel mucus. However, cough suppressants could be taken at bedtime if needed in order to sleep. Take medicine as prescribed. To help avoid side effects, use inhalers or medicine only in proper dosages. Watch your nutrition and drink more warm liquids including soups, tea, and water. Stay away from foods that stimulate mucus formation such as flour, milk, canned foods, poultry and any foods that cause allergy symptoms. Causes of Bronchitis Acute bronchitis The same viruses that cause colds often cause acute bronchitis. Sometimes to get the mucus moving, doctors may suggest using expectorants. These types of medicine will thin the mucus out, which makes it easier to get rid of quicker. Before doing this, consult the pediatrician. The main culprit for kids is the constant, long-term exposure of smoking. Sometimes allergies and environmental irritants can be troublesome for them too. To find out more helpful tips in helping you manage Bronchitis, visit Help with Bronchitis website, where the best home remedy tips for managing bronchitis are discussed amongst others Treatment of Bronchitis: There is no cure for chronic bronchitis. The goal of treatment is to relieve symptoms and prevent complications. It is crucial to quit smoking to prevent chronic bronchitis from getting worse. Any other respiratory irritants should be avoided. When it seems there is no infections, doctors will treat the child for a common cold. This means staying in bed, drink lots of fluid. Using a humidifier can help the child get over the cold much quicker. If the child experiences dry cough, it would be necessary to use a cough suppressant for their own comfort. Tylenol or Motrin should be the only two medicines parents should use. Smokers also put others at risk. The dangers of breathing in second-hand smoke are well known. Smokers harm their loved ones by exposing them to the smoke they exhale. All sorts of health problems are related to breathing in second-hand smoke. Children are especially susceptible to the dangers of second-hand smoke because their internal organs are still developing. Children exposed to second-hand smoke are more vulnerable to asthma, sudden infant death syndrome, bronchitis, pneumonia, and ear infections.

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4: Results for J-R-Hunter | Book Depository

Buy A Popular Treatise On Colds and Affections of the Air Passages and Lungs by Robert Hunter (ISBN:) from Amazon's Book Store. Everyday low prices and free delivery on eligible orders.

This is an acute, usually recurrent, and distinctly seasonal inflammation of the nasal mucous membrane sometimes extending to the conjunctiva of the eye, and the membranes of the pharynx, bronchial tubes and Eustachian tubes. While defined as an acute inflammation which is subject to recurrent and seasonal acute exacerbations, the catarrh is continuous but is peculiarly subject to, pronounced increase in severity of symptoms in the months of May, June, July and August. In the South it may last all the year. Nasal obstruction with rhinorrhea and much sneezing are accompanied by congestion of the conjunctive, watering of the eyes, itching of the eyelids, nose and palate. There is headache and lassitude and, occasionally, paroxysms of asthma. It may be described as a severe cold running on day after day, with no let-up, and often growing worse, for the longer it persists in the acute stage, the more sensitive the mucous membrane becomes. The condition of hypersensitiveness to the toxalbumin of pollen is called anaphylaxis or allergy. Since, however, allergy does not cause itself this theory of cause does not go deep enough. Although it is true that dust, pollen, emanations from horses, cats, dogs, birds, etc. Anything that irritates a sensitive mucous membrane occasions a rush of blood to the point of irritation and the pouring out of an exudation to flush away the irritant. Within recent years enterprising doctors have discovered that some hay fever subjects are allergic to their sweet-hearts and suffer an exacerbation aggravation of symptoms every time they visit their lovers. Hay fever is simply a peculiar type of chronic catarrh, which only a small percentage of catarrhal subjects develop. Two people have catarrh to the same extent; one develops hay fever, the other does not. The sensitive individual is neurotic, the other is not. Hay fever is chronic catarrh in a neurotic subject. The non-neurotic sufferer from catarrh will be influenced little or none by the inhalation of dust, pollen, smoke, pungent odors, or cold air. Hay fever rests on a basis of enervation and toxemia. The hay fever sufferer is made highly toxic by his enervating habits which inhibit full elimination of normal body waste. The subject builds his disease daily by keeping his stomach deranged with his meats, potatoes, breads, pies, cakes, pastries, butter, breakfast foods, and even with his luscious fruits covered with cream and sugar. These things over-stimulate him and produce a toxic state of his blood which further adds to his enervation and produces nervousness and sensitiveness as well as catarrh. Complete recovery may be expected in six weeks or less in the vast majority of cases. A few cases persist longer than this time. Care of the Patient: Running away from the external sources of irritation is merely a palliative measure. Hoping for the hurried coming of the old charlatan, practicing without a license, Jack Frost, to put an end to pollens, wastes a lot of valuable time and causes the sufferer to endure a lot of misery. Searing the nose, wearing air-filters, staying all summer long in air-conditioned rooms, going on sea voyages, etc. Most of these palliatives are for the well-to-do only. A fast for the removal of toxemia will end the catarrh in a very short time and remove all sensitiveness to pollen, dust, sweetheart, etc. Rest for the nervous system and a healthful mode of living will build up a high degree of health and prevent all future recurrence of hay fever. Following the elimination of toxemia, restoration of normal nerve energy and correction of the mode of living, the evolution into good health is sure and rapid. This is inflammation of the nasal mucous membrane. Acute rhinitis is known as coryza, or colds; chronic rhinitis is known as chronic nasal catarrh. Catarrh is inflammation of a mucous membrane with hypersecretion of mucus. Three varieties are classified as follow: There are a mucoïd or mucopurulent discharge from the nose, nasal obstruction from swelling or thickening of the mucosa or from inspissated secretion, mouth breathing, a nasal intonation of the voice and impairment of the sense of smell. The membrane of the nose is congested, swollen and highly irritable. In advanced cases exostoses bony growths from the bones of the nose are seen. This form is seen most often in young adults and more often in females than in males. The lining membrane of the nose is pale, dry and glazed. Adherent scabs are usually present. The nasal chambers are large, the secretion is very abundant, thick, and of a yellowish or

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greenish color. An extremely offensive odor, probably due to decomposition of retained secretions, is characteristic of this stage. Necrosis of the bones of the nose and sinking of the bones of the nose are seen in advanced cases. Symptoms of catarrh of the neighboring chambers are commonly present. Dryness of the throat and hawking from pharyngitis, deafness from catarrh of the middle ear, watering of the eyes from catarrhal occlusion of the tear ducts, and dull frontal headache from sinusitis, are the most common of these symptoms. This is a smooth growth from a mucous surface, result of a local inflammatory hyperplasia overgrowth, and is supported by a stem. Catarrh of the nose is one of the earliest manifestations of mucous membrane irritation; beginning in infancy with continuous and progressive changes in. Enervation and excessive food intake are basic causes. Toxemia and indigestion are always precedent. Catarrh or fermentation in the stomach is always present though there are no digestive symptoms. Excesses of starch, sugars, fats and milk are especially likely to build catarrh. Men have more catarrh than women because they eat more, wear more clothing and dissipate more. Men enervate themselves more and have more toxemia. Complete recovery in all forms may be expected upon removal of the cause. Polyps are readily absorbed by fasting and do not recur if the causes of catarrh are avoided. This should be obvious. Stop all enervating practices, secure sufficient rest for nervous recuperation, fast long enough to eliminate toxemia and restore normal secretions and follow a healthful mode of living thereafter. Only by rigid adherence to this program can complete recovery be achieved. Only by right living can recurrence be prevented. Polyps will be absorbed during the fast and, if future catarrh is avoided, will not recur. The thickened membranes of the nasal passages will return to their normal thickness and the obstruction to breathing these cause will end. In atrophic rhinitis not all the wasted structures can be rebuilt. This is an acute or chronic catarrhal inflammation of the mucous membranes lining the nasal sinuses. The sinuses, or accessory air chambers, are the hollow interiors of the bones of the face. In the lower forehead just above the roof of the nose, are located the frontal sinuses, along the roof of the nostrils are the ethmoid sinuses; opening at the rear are the sphenoid sinuses; while the antrums open on the sides. All of these sinuses, together with the nose, form a series of communicating air chambers and are all lined with mucous membrane. The membranes of the sinuses are continuous with the Schneiderian membrane of the nose. In sinusitis there is the same formation of mucus, the same thickening of the lining of the membrane, and the same formation of polyps, that are seen in chronic catarrh of the nose. If the catarrh is in the frontal sinuses there will be a continuous discharge from the nose; if in the sphenoid sinus the mucus trickles down into the throat. In all cases the condition is very annoying, often painful and, as now cared for, apparently hopeless. The sinuses do not drain as well as the nose, so that the mucus tends to remain longer in them and to decompose. Sometimes they actually become obstructed so that all drainage is stopped. Pains, headaches, and other annoying symptoms, result. It rests on a basis of enervation and toxemia and gastro-intestinal catarrh. Acute sinusitis is often seen in colds as a part of the cold; chronic sinusitis is often associated with chronic catarrh of the nose and throat and is merely part of the same condition. It frequently accompanies hay fever and asthma, sometimes developing in advance of these troubles, sometimes developing subsequent to their appearance, but in all cases being merely part of the catarrhal condition present in the eyes, nose, throat and deeper respiratory structures. It is nothing uncommon to find patients who suffer with sinus troubles to also have gastritis, or colitis, or metritis, or cystitis. Indeed sinusitis almost never exists alone; there is almost certain to be catarrhal conditions elsewhere. By this we do not intend to convey the impression that the sinusitis causes the colitis or the metritis, or vice versa; but, rather, that all of these local conditions are but successive and concomitant developments out of a common or systemic condition. Recovery is possible in all cases if causes are removed. Rapid recovery is the rule under Hygienic care. Sinus troubles are better or worse as the general condition improves or retrogresses and as living habits vary, but they are never recovered from until their causes are removed or corrected. Experience and skill are required to ferret out and correct or remove all, of the remote causes for these are legion. To correct a few causes and leave the others in operation will not suffice to remedy the condition. The removal of the immediate cause is accomplished by a cleansing and recuperating plan that only an experienced Hygienist can fit to the needs of each case. The amount of

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mucus that accumulates in severe cases is great. A highly congested antrum may give the appearance in the X-ray of pus accumulation and the shadow will be interpreted as an abscess. A few days without food will result in ideal recovery in such cases, whereas cutting into the antrum will produce suppuration of the antrum. Fasting, rest, sunbathing, diet, etc. The fast should last until the catarrh of the nose and sinuses is cleared up, unless otherwise contraindicated. Starches, sugar, milk and fats are not well tolerated in catarrhal conditions and should be fed sparingly after the fast.

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Thomas Health Impact News A study on treating asthma with essential oil showed substantial benefits from the use of lavender oil. Over 26 million children and adults in the United States have asthma. Many adults also have asthma. Inflamed airways in the lungs cause wheezing, breathlessness, chest tightness, and coughing at night or early in the morning. An intensification of symptoms is called an asthma attack. An asthma attack is often triggered by exposure to some type of external air contamination. Bronchial asthma is characterized by bronchial allergic inflammation, which reduces the capacity of the airways to move air into and out of the lungs. Scientists evaluated the anti-inflammatory effect of essential oil of lavender on experimentally created bronchial asthma in mice. They induced asthma in two groups of mice and then gave one group daily inhalation treatment with lavender oil for two weeks. Then they compared the condition of the lungs of the mice in the two groups. The mice that received the lavender treatments showed less airway resistance. They had fewer eosinophil cells specialized white blood cells of the immune system in the fluids and the tissue of the lungs when compared with the control group. The lavender group also had less mucus in the lungs. Furthermore, the lavender group showed lower Interleukin cytokine levels in the fluids of the lungs, which means that their immune systems were less stressed after breathing lavender oil. The researchers concluded that lavender may be useful as an alternative medicine for bronchial asthma. The attack happens in the tubular airways of the lungs. The system of airways in the lungs resembles an upside-down tree. The largest airway is in the throat. The airways divide and branch off in different directions as they spread into the lungs. The airways become smaller as they spread, just like the branches of a tree are smallest at the outer edges of the tree. During an asthma attack, the sides of the airways swell, which reduces the open space in the airways. This restricts the movement of air, which makes it more difficult to breathe. The result is that less air gets in and out of the lungs as a person breathes. Mucous that the body makes also clogs up the airways and further reduces the airflow. In a few cases each year, death results from untreated asthma attacks. The causes of asthma attacks are different for each person. Avoiding asthma attacks begins by avoiding the triggers. Examples of common causes are listed below. Avoid Secondhand Fragrances â€” This is air pollution from the perfume, cologne, and scented laundry products that other people have on their bodies and clothing. Use a barrier against Dust Mites â€” Dust mites are tiny insects that are in almost every home. Use special mattress covers and pillowcase covers on your bedding. This makes a barrier between the insects and your lungs. Avoid down-filled pillows and comforters. Remove stuffed animals and clutter from the bedroom. Wash your bedding on the hottest water setting. Eliminate Cockroaches â€” Cockroaches and their droppings can trigger an asthma attack. Get rid of cockroaches in your home by removing as many water and food sources as you can. Avoid Pets â€” If a furry pet is causing asthma attacks, then you may want to find the pet another home. Clean Up Mold â€” Breathing in mold can trigger an asthma attack. Leaking water pipes or leaks in walls or roofing will cause mold growth. Eliminate Indoor Air Pollution â€” Smoke from wood stoves, incense, candles of any kind, and air fresheners can be triggers for asthma attacks as well as scented cleaning products. Avoid breathing Outdoor Air Pollution â€” These sources include: Other Triggers to Avoid â€” Breathing in chemicals; acid reflux; physical exercise; some medicines; bad weather such as thunderstorms, high humidity or smog; breathing cold dry air; certain foods and food additives; and fragrances of all types. Lavender Can Strengthen the Ability to Resist Asthma Attacks The use of organic essential oil of lavender can help a person resist asthma attack triggers, because it can bring greater physical and emotional vitality to the entire body. This is how it helps: Strengthens the immune system. Helps a person get adequate sleep. Treats other respiratory problems such as bronchitis, sinus congestion, laryngitis, tonsillitis, etc. Eases migraine headaches, nervous exhaustion, anxiety, and depression. Can help with colic, vomiting, and flatulence. In combination

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with two other essential oils, it may help ease asthma attacks. Because of its ability to relax nerves, lavender has been used to calm coughs and ease breathing in colds and influenza. Using Essential Oils to Cure Disease. Individual lavender plants grow up to 1 m. The narrow leaves are grey and downy; the flowers are blue-grey, borne on long slender stems. The oil glands are in tiny star-shaped hairs with which the leaves, flowers and stems are covered; rub a flower or leaf between your fingers to release some oil it has a short-lived aroma. Lavender has been used since ancient times as much for its delicate perfume as for its medicinal properties. The oils of aspic and stoechas were mentioned by Dioscorides, Galen and Pliny. The Romans added lavender to their bath water the name comes from the Latin, lavare, to wash. It was an established plant by the twelfth century as St Hildegard awarded it a whole chapter in her medical treatise. It was also a plant grown in medicinal monastery gardens in Europe in the thirteenth and fourteenth centuries. Lavender plants were grown at Hitchin in Hertfordshire in , being commercially cultivated after In the eighteenth century, the perfumery company, Yardley, was making lavender soaps and perfumes, with fields at Mitcham in Surrey. Like so many other plants which produce essential oils, the trade is recorded in street names in towns and cities – Lavender Hill in south London among them. Norfolk is now as famed for its lavender fields as is Provence, particularly the mountains near Grasse, in France. All lavender varieties were once distilled together without distinction, many calling the resultant oil sticadore or oil of spike. The ancients classified lavender as a stimulant, tonic, stomachic and carminative. Matthiole, the sixteenth-century botanist, regarded lavender flowers as a most effective panacea, mentioning lavender cures for epilepsy, apoplexy and mental problems; one of his recipes to prevent fluid retention involved boiling flowers in wine and drinking two glasses of this a day. The French used to make an herbal tea with lavender, cinnamon and fennel; this would cure jaundice as well as act as a cardiac tonic. Lavender is valued for containing many of the same properties as sage, rosemary and the other members of the labiate family: All in all, it is one of the most commonly used, valued and prescribed oils. The Essential Oil Description: The flowers are steam-distilled, and approximately kg lbs. Lavender oil varies in colour from dark yellow to dark greeny-yellow, and smells very highly scented. The content and quality of the oil depends greatly on climate, soil and altitude. The French lavender is considered better than the English, for instance, because it is richer in linalyl acetate: Eases Agitation in Dementia Patients. Treats Alopecia Areata an autoimmune disease that causes hair to fall out in patches. It is easy to grow and is well suited for an inexperienced gardener such as myself. It will be happy in a hot sunny location that gets 8 hours of direct sun or more per day. It likes a well-drained soil and is happy in a rocky soil mix. For additional information about planting, cultivating, trimming, and gathering the fragrant flowers, please use these links. It can help disinfect a wound, treat skin infections, treat insect bites, and provides fast relief for minor burns. It stops the pain from sunburn and brings rapid healing. In my experience, it can even prevent kitchen burns from blistering and can prevent sunburned skin from peeling if these burns are treated immediately. Lavender oil should not be used in the sun to prevent sunburn. The essential oil of lavender is one of the most popular essential oils. It is added to many skincare products and its aroma is enjoyed by both men and women. Its medicinal uses are many and varied. It is a gentle oil, yet it can be very powerful. It can be used to treat MRSA methicillin-resistant staphylococcus aureus and multi drug resistant clinical strains of Escherichia coli. So, as usual, I applied a couple drops of organic essential oil of lavender in the palms of my hands, and spent some time inhaling the aroma and enjoying the scent. Unfortunately, I forgot about the power of lavender to induce sleep. It is always important to not lose sight of the fact that organic essential oils are strong medicinal substances and their effects can be powerful. The health giving benefits of organic essential oils are truly a wonderful gift from God. I encourage you to add a bottle of organic lavender essential oil to your medicine cabinet and to learn how you can use it for first aid and for addressing chronic health problems. Additional Resources For additional suggestions from Heidi Stevenson about how lavender can be used to improve a wide variety of health concerns, please use this link:

6: Natural Herbs Bronchitis - Bronchitis-causes, Symptoms,treatment

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