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needed somewhere—clean water, grit, scratching straw, and so on. True, there weren't any Exercise Books to mark in the evenings, but long hours went in washing the eggs and packing the crates.

I didn't have any major misfortunes. I didn't, for instance, drop a crate of eggs, nor did the mortality rate rise appreciably during my stewardship. For a complete novice I suppose I must consider myself lucky. But once I did leave the fowlhouse door open for an unguarded moment—and spent the entire afternoon in complicated manoeuvres. Even so, I'm afraid at least half-a-dozen pullets joined the ranks of the nomads. One day I left the assignment of wheat for an outlying shed on the path for a few minutes, and came back to find the horse with his head in the tin. As I had

heard that wheat was very bad for horses, I expected for days to hear of this much-prized animal's death. But time went on and he seemed none the worse. Needless to say I took good care that incidents like these didn't happen a second time!

HOMEWARD bound again, I was having a nice rest in the train and thinking over my experiences (already beginning to gain in retrospect) when the carriage door opened, and in walked my two teacher friends. We were soon deep in discussion. As the conversation passed from schemes of work to apparatus, overcrowded classrooms, and other grim realities of the Winter Term, the thought crossed my mind that perhaps my sister was right after all. From the school-room to the poultry run is not so far as most teachers think.

Advice on Health (No. 232)

MIGRAINE

(Written for "The Listener" by DR. H. B. TURBOTT, Director of the Division of School Hygiene, Health Department).

YOU probably know an acquaintance or friend who suffers from paroxysmal headache. This trouble is fairly common and is called migraine. It is a tendency to suffer recurring intense headaches that develop, usually on waking or on getting up in the morning. Often the trouble dates from childhood. Sometimes it begins later in life. The usual run of the disease is from puberty to middle life; it rarely carries on into old age and it often runs in a family. The cause is quite unknown and while theories abound, nobody can yet be definite about the origin of this trouble.

Migraine causes much suffering and loss of work. There is nothing wrong with the bodily health apart from the recurrent headache. An attack usually begins in the morning and is something like sea-sickness—there is giddiness or something very near to it, something seems to go wrong with the vision, and there is nausea that may lead to vomiting after a while. The visual disturbances, if present, take the form of blurred vision, floating spots, or moving lines, or colour flashes, and last for a quarter of an hour or so. The headache follows these initial symptoms. It often begins in one spot, usually in the front of the head, and gets more and more severe. The patient becomes utterly miserable. Light, noise, and movement make the headache worse. This attack may last for hours, or run into days—the victim is usually incapacitated for many hours, then falls into a heavy sleep, to wake up next morning, very much shaken by the illness. One of the annoying features of this disease is that, once the headache is in full swing most remedies fail to relieve it except natural sleep.

Keep Calm!

Persons with migraine do not need an operation. They are usually intelligent, tense, and quick. They like to get things done quickly and done just so! They fatigue or wilt quickly under any strain or excitement. They need to recognise their trouble and to live calmly so that the brain does not get on edge and allow the explosive headache to take place.

Although it is difficult to relieve migraine attacks once the headache has started, treatment benefits the majority of sufferers. Medicinal treatment given before attacks is most useful and your doctor has several drugs available. Sometimes a drug given at the very commencement of the attack will ward it off. Of recent years ergotamine tartrate, or gynergen, has been used to cut short those violent headaches once they have started. It is said to be best given through injections—in any case a migraine person should be under medical care.

Sometimes a sufferer from migraine is allergic to some article of diet or other proteins. The doctor will make skin tests for sensitivity to foreign proteins, and desensitise against any found to be positive. Sometimes a diet rich in protein, poor in fat and carbohydrate, free from salt, and low in fluids, is helpful—but not in all cases. What is needed is a balanced diet. If a patient knows what precipitates an attack of sensitivity, then that particular agent has to be avoided if possible.

Why Children need a balanced breakfast



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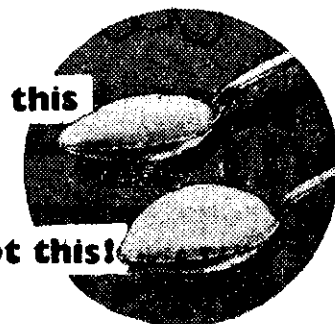
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