### WORK-IN-PROGRESS (JANUARY 2, 2024) PARALLEL CHART FOR

## **Chapter 9 — General Reducing Rules**

of *How to Reduce and How to Gain* (1920) by William S. Sadler, M.D. and Lena Kellogg Sadler, M.D.

© 2024 Matthew Block

## Sources for Chapter 9, in the order in which they appear

- (1) Russell H. Chittenden, Ph.D., LL.D., Sc.D., *The Nutrition of Man* (New York: Frederick A. Stokes, 1907)
- William S. Sadler, M.D., and Lena K. Sadler, M.D., "Why We Get Fat and What to Do About It", in *The Ladies' Home Journal*, June 1920, pp. 37, 100, 102-103
- (3) Prof. Gustav Gaertner, M.D., Reducing Weight Comfortably: The Dietetic Treatment of Obesity (Philadelphia: J. B. Lippincott Company, 1914)

## Key

- (a) Green indicates a Sadler text (book or magazine article).
- **Yellow** highlights most parallels.
- (c) Tan highlights parallelisms not occurring on the same row.
- (d) An <u>underlined</u> word or words indicates where the two parallel texts pointedly differ from each other.
- (e) Bold type indicates passages which Sadler copied verbatim, or nearly verbatim, from an uncited source.

#### Work-in-progress Version 2 Jan. 2024 © 2024 Matthew Block

# IX: GENERAL REDUC-ING RULES

# III: THE BALANCE OF NUTRITION (Chittenden 77)

Fat in the body represents inert material stored up mainly for nutritive purposes;

hence, in hunger it is used largely, and serves to protect more important tissues.

Thus, experiments have shown that in long periods of fasting, adipose tissue may be consumed to the extent of 97 per cent of the total amount present,

while the heart and nervous tissue will not lose over 3 per cent of their tissue substance (C 83–84).

"WHY WE GET FAT AND WHAT TO DO ABOUT IT" (*The Ladies' Home Journal* 37)

**General Reducing Rules** (The Ladies' Home Journal 102)

During the period of flesh reduction we advise that the habits of life be regulated in accordance with the following general rules:

[contd] (1) PLAY THE GAME: Be sure that you understand just what your doctor wants you to do or just what you aim to accomplish.

9:0.1 FAT in the body represents inert material stored up mainly for nutritive purposes;

hence, in hunger it is used up largely and serves to protect more important tissues.

Thus, experiments have shown that in long periods of fasting, adipose tissue may be consumed to the extent of 97 per cent of the total amount present,

while the heart and nervous tissue will not lose over 3 per cent of their tissue substance.

During this period of flesh reduction, we advise that the habits of life be regulated in accordance with the following general rules—

the details being prescribed according to the needs of the individual:

9:0.2 *1. Play the Game:* Be sure that you understand just what your doctor wants you to do, or just what you aim to accomplish.

Weigh yourself not less than once a week on the same scales.

Play the game—live up to the rules (*LHJ* 102).

[contd] (2) MASTICATION: Thorough mastication of your food is essential to good digestion,

but we are not at all desirous that fat folks should become interested in "Fletcherizing" their food.

The more you chew your food the more of it will be digested.

We advice that you simply give the food a good, everyday mastication (*LHJ* 102).

[contd] (3) UNDEREATING: The fundamental underlying principle of reducing is all expressed in the one word—*underfeeding*.

Carry out your diet régime faithfully and conscientiously (*LHJ* 102).

[contd] (4) YOUR DIETARY: Remember, you will be told that certain foods are non-fat-producers, that you may eat quite freely of them;

stick to this dietary and leave entirely alone those fattening foods which you find on the forbidden list (*LHJ* 102).

[contd] (5) NUMBER OF MEALS: There is a great difference of opinion regarding the number of meals a day to be eaten during the reducing campaign.

We think a great deal depends on the personal habits and inclinations of the patient.

#### 9: HOW TO REDUCE AND HOW TO GAIN

Weigh yourself not less than once a week on the same scale.

Play the game—live up to the rules.

9:0.3 2. Mastication: Thorough mastication of your food is essential to good digestion,

but we are not at all desirous that fat folks should become interested in "Fletcherizing" their food.

The more you chew your food, the more of it will be digested.

We advise that you simply give the food a good, everyday mastication.

9:0.4 *3. Undereating:* The fundamental underlying principle of reducing is all expressed in the one word—*underfeeding.* 

Carry out your diet régime faithfully and conscientiously.

9:0.5 4. Your Dietary: Remember—you will be told that certain foods are non-fat producers—that you may eat quite freely of them;

stick to this dietary and leave entirely alone those fattening foods which you find on the forbidden list.

9:0.6 5. Number of Meals: There is a great difference of opinion regarding the number of meals per day to be eaten during a reducing campaign.

We think a great deal depends on the personal habits and inclinations of the patient.

Many do well on three, four, or even five small meals; others do best on practically one meal a day.

The majority do best on two (*LHJ* 102).

[contd] (6) YOUR APPETITE: If you have a normal appetite, you will not suffer much hunger while reducing; if you have an abnormal appetite resolve to curb and control it.

It is not necessary to eat until one is distressed in order to appease natural and normal hunger (*LHI* 102).

[contd] (7) TOO MUCH SLEEP: Don't sleep too much while reducing.

Take six or seven hours of rest—no more.

Keep bright and active, and spend little time in bed—unless advised to do so by the doctor because of organic disorders which may complicate your reducing program (*LHJ* 102).

[contd] (8) EXERCISE: Take  $\underline{your}$  exercise regularly.

Walking is possible for everyone, and it is one of the best exercises in the world; after that, swimming.

Both of these exercises bring every muscle in the body into play and make and keep your figure slender.

#### 9: HOW TO REDUCE AND HOW TO GAIN

Many do well on three, four, or even five small meals; others do best on practically one meal a day.

The latter method has the advantage of enabling you to "fill up" in old-fashioned form at least once a day. The calories for the day are prescribed—and it makes little difference whether this given amount of food is eaten at one sitting or five—let the patient's personal preference decide this question.

The majority do best on two meals a day.

9:0.7 6. Your Appetite: If you have a normal appetite, you will not suffer much hunger while reducing; if you have an abnormal appetite—resolve to curb and control it.

It is not necessary to eat until one is distressed in order to appease natural and normal hunger.

9:0.8 7. Too Much Sleep: Don't sleep too much while reducing.

Take six or seven hours of rest—no more.

Keep bright and active, and spend little time in bed—unless advised to do so by the doctor because of organic disorders which may complicate your reducing program.

9:0.9 8. Exercise: Take exercise regularly.

Walking is possible for everyone, and it is one of the best exercises in the world; after that, swimming;

both of these exercises bring every muscle in the body into play, and <u>make</u> and keep your figure slender.

#### 9: HOW TO REDUCE AND HOW TO GAIN

More about exercise later on (LHJ 102).

[*Note:* Sadler named these forms of exercise in the the next installment of "Why We Get Fat and What to Do About It"; see *LMJ* Aug. 1920, p. 146).]

[contd] (9) CLOTHING: Clothe yourself comfortably and sensibly.

Do not wear tight shoes or tight corsets or tight clothes of any kind (*LMJ* 102).

[contd] (10) HOME TREATMENT: Carry out your home instructions to the letter—don't neglect an item without having a good reason for so doing (*LHJ* 102).

[contd] (11) BLOOD PRESSURE:

No person with a high blood pressure—

and, for that matter, a very low blood pressure would be almost as serious a condition to trifle with—

should undertake a reducing régime except under close medical supervision (*LHJ* 102).

Horse-back riding, rowing, and golf are also good forms of physical exertion for "reducers."

9:0.10 *9. Clothing:* Clothe yourself comfortably and sensibly.

Do not wear tight shoes nor tight corsets, nor tight clothes of any kind.

Especially do not tighten the neck in any way; it impedes circulation. Wear common-sense and seasonable clothing.

9:0.11 10. Home Treatment: Carry out your home instructions to the letter—don't neglect an item without having a good reason for so doing—

and even then, report the fact to your doctor.

Take your baths or other home treatment just as instructed.

9:0.12 11. Blood-Pressure:

As already has been suggested—

no person with a high blood-pressure

(and, for that matter, a very low bloodpressure would be almost as serious a condition to trifle with)

should undertake a reducing régime except when under close medical supervision.

Such cases require the simultaneous treatment of obesity and high blood-pressure.

#### 9: HOW TO REDUCE AND HOW TO GAIN

These cases can be reduced without danger, and the blood-pressure is nearly always favorably affected by a scientific and gradual reduction in weight. Don't be afraid to reduce because your blood-pressure is high; only see that you are in competent hands while the procedure is being carried out.

#### 9:0.13 12. Reducing Treatments:

If you are following out the Institutional régime and under a physician's supervision, remember that there is a definite reason or purpose for each procedure ordered in your case, and so, whether it is the Bergonie chair, the roller reducer, the sinusoidal exercise bath, the electric-light bath, or the Scotch shower and douche—take it regularly and faithfully. Success comes quickly to those who diligently and intelligently carry out every detail of their individual régime.

VIII (Gaertner 86)

9:0.14 13. The First Week's Loss:

An extremely large majority of patients come to the treatment after a stage of excess nutriment.

On the previous days and also on the day at the beginning of the treatment

(with me they appear in the afternoon),

they have consumed much greater quantities of solid and liquid food than on the days of the treatment. An extremely large majority of patients take up this treatment after a period of excess nutriment.

On the previous days and also on the day of the beginning of the treatment,

they have consumed much greater quantities of solid and liquid food than they will on the days of the treatment.

#### SOURCE 9: HOW TO REDUCE AND HOW TO GAIN

The contents of the stomach and intestine are therefore much more abundant and heavy at the first weighing than after the expiration of the first days of treatment,

during which the excess liquid and the food residues from the "pre-treatment" period have been expelled.

The decrease in weight in the first week of treatment is totalled up from two factors:

the loss of fatty tissue and the difference in the weight of the stomach and intestinal contents.

However, these latter quantities can amount to several kilogrammes,

especially in men who have been accustomed to drink with their copious meals huge quantities of alcoholic or non-alcoholic beverages (G 89-90).

[contd] The second recorded weight gives us the first information about the time effect of the treatment.

The attention of the patient, who is delighted by the great success of the first week of treatment,

must be called to the fact that it can not continue at the same rate.

We must also avoid the deduction that, because the first week has proved a great success, we are entitled to increase the diet. The contents of the stomach and intestine are therefore much more abundant and heavy at the first weighing than after the expiration of the first days of treatment,

during which the excess liquid and the food residues from the "pre-treatment" period have been expelled.

The decrease in weight in the first week of treatment consists of two factors:

the loss of fatty tissue, and the difference in the weight of the stomach and intestinal contents—

and these latter items may amount to several pounds.

9:0.15 The second week's recorded weight gives us the first information about the real effect of the treatment.

The attention of the patient, who is delighted by the great success of the first week of treatment,

must be called to the fact that the good work cannot continue at the same rate.

They must also avoid the deduction that, because the first week has proved a great success, they are entitled to increase the diet.

#### 9: HOW TO REDUCE AND HOW TO GAIN

We would be much disappointed at the result of the next weighing. Often it occurs without our interference. The patient thinks over his case

The patient reflects about his case,

and, contrary to our prediction as to the slight success of the next week,

and contrary to the doctor's prediction as to the slight gain for the next week,

#### arrives at the conclusion that

#### arrives at the conclusion that

one need be by no means so particular about following the prescription,

one need by no means be so particular about following the diet prescription,

since the first week has brought a very large loss of weight.

since the first week brought such a very large loss of weight.

He thinks that a decrease of 1 Kg. will probably take place even with a somewhat more abundant diet.

The patient thinks that a decrease of three or four pounds will probably take place even with a somewhat more abundant diet.

Result: at best a standstill in the weight, generally a slight increase.

Result: at best, a standstill in the weight; generally a slight increase.

Many patients attempt, earlier or later, to determine whether the continual decrease in weight is not an accidental coincidence with the observation of the regimen,

9:0.16 Many patients attempt, earlier or later, to determine whether the continual decrease in weight is not an accidental coincidence with carrying out the régime

and whether it is really necessary to stick absolutely to the directions.

and whether it is really necessary to stick absolutely to the diet directions.

They commit transgressions which they consider harmless.

They commit transgressions which they consider harmless.

The next weighing teaches them better (G 90).

The next weighing teaches them better.

Scientific principles govern the whole reducing program and increasing success comes only to those who are reasonably faithful and intelligent in carrying out the instructions provided.