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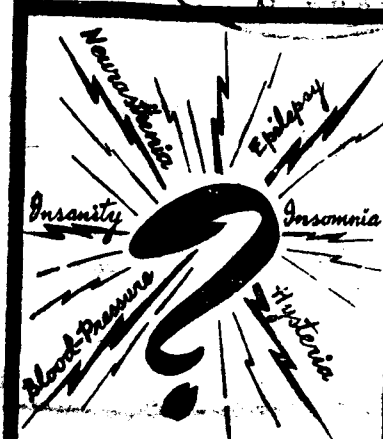
Vol. XXIV—No 11

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HEALTH

ESTD. 1923

Edited by: Dr. U. RAMA RAU and U. KRISHNA RAU, M.S., B.S., 1948



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THE HEALTH MINISTERS' CONFERENCE

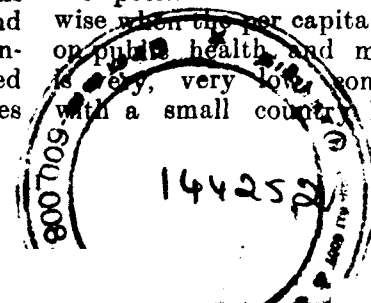
WE are glad that the Hon. Pandit JAWAHARLAL NEHRU laid special stress on the need for co-ordination between the Centre and the Provinces to tackle the problem of public health in this country satisfactorily. In the opening address he delivered at the Conference of Health Ministers convened last month by the then Minister in charge of the Public Health Department in the Government of India. The agenda prepared for the Conference would have been comprehensive and the subjects brought forward for discussion all-embracing, had not the dilly-dallying and shilly-shallying tactics of a communal party in regard to its entry into the Interim Government created a state of suspense in which it was not possible for him to go full steam ahead. He had therefore to restrict himself to a passing reference to some of the problems, leaving the rest—and we may say the major ones—for consideration at a later Conference. The problems thus left out include among others the control of tuberculosis, venereal diseases and leprosy, the three greatest scourges that take a heavy toll. Unless steps are taken side by side with sanitation, water-supply, malaria, etc., the position would remain much the same. Tuberculosis ranks first among the communicable and therefore preventable diseases. Unless the tuberculous are isolated and the contacts of known cases

over a long period of years examined, the chances are that the disease will gradually spread, taking a heavy toll in the age group of 15 to 45. May be an improvement in the environment might help to a certain extent to control the spread of the disease, but the problem of tackling the infected and the contacts would still remain. The effect of leaving venereal diseases uncontrolled can well be imagined than described. About leprosy the less said the better. We hope therefore that the new Health Minister will convene at an early date a Conference of Health Ministers and experts to decide upon the most effective steps to control these diseases.

We have now to confine ourselves to the problems that were considered at this Conference. It is now accepted on all hands that health is one of the goods of life to which every man or woman or child has a right. Either in town or in village, the sanitary condition is very, very unsatisfactory. Our death rate is 24 as compared with 11 in other countries, and the infantile mortality rate of 169 for every thousand births is simply appalling. Not that we are unaware of the position. But it required a Committee to bring home to the Government the seriousness of the position. How can it be otherwise when the per capita expenditure on public health and medical relief is very, very low, compared even with a small country like Ceylon.

Health]

November '46



The *laissez faire* policy can no longer avail. There has been a growth of social consciousness, of democratic ideals and of a new conception of social welfare of the rights of the individual and the duties of the State, which it is not possible to ignore. The State must realise its responsibilities and adopt efficient measures to ensure the health and well-being of the people. Even the three priorities which the Hon. Sir SHAFFAT AHMED KHAN has suggested — sanitation, malaria and the provision of health services in the rural areas, are big enough to entail huge expenditure. Under the scheme of provincial autonomy now in force, the Departments of Public Health and Medical Relief are under the direction and control of Provincial Governments, and all schemes have to be carried out by them. As we said in the last issue of the HEALTH, the financial positions of the Provinces vary, some fairly well off, some eking out a hand to mouth existence, and some depending on doles from the Central Government which has reserved to itself, according to the present scheme of things, growing sources of revenue. And with the introduction of prohibition in some areas in some provinces and with the prospect of its extension throughout the country in the very near future, the financial position of the Provinces will deteriorate considerably till such time as a new constitu-

tion is hammered and placed on the statute book, apportioning the revenue sources equitably. We had therefore hoped that the Central Government which is as much concerned with the health of the people as the Provinces, would come forward with an announcement that it would share the burden with the Provinces. But from what Sir SHAFFAT has said it appears that they will confine themselves with provision of expert advice and development of activities and institutions which are beyond the scope or capacity of individual Provinces. These, we think, are not sufficient to enable the Provinces to face the problem squarely and tackle it satisfactorily. We do not know if the Health Ministers assembled at Delhi pressed for substantial aid from the Centre to enable them to carry out the policies decided upon at the Conference. If this has not been done, it is time they raise the matter and obtain sufficient aid from the Central Government in this behalf. It is not the Provinces alone that will be benefited by the improvement in the public health. The Central Government will equally be benefited as the improvement in public health is bound to bring them increased revenues. We would therefore appeal to the Central Government to willingly come forward to help the Provinces by bearing a share of the cost, in addition to the help they have already promised.

The Effect of Diet on Longevity

Superman, not as a comic strip character but as a scientific possibility, was envisaged by Professor Henry C. Sherman, of Columbia University, in an address before the Franklin Institute, Philadelphia. He came to accept the award of the Franklin medal for his work in nutrition (*Science News Letter*, Vol. 49, p. 310). He told of a strain of white mice which he had been feeding for a number of generations on a diet which was not merely adequate but contained large amounts of vitamins, calcium and protein. These animals now mature more quickly than normal, live longer and retain their vigor to the last. He reasoned that similar nutrition would have a like effect on human beings. They would reach manhood earlier, would have more years of top efficiency with no period of senility. Public health measures up to the present time have increased the life expectation of children but not of adults. This new regimen would lengthen life for all. There would be more clear thinking and decisive action than now; men and women would not grow overcautious and become obstructive after attaining positions of greatest influence and power. Large social and economic changes would result from this shortening of the periods of childhood and old age. —Good Health.

Sexual Knowledge

For BOYS and GIRLS

KRISHNA KUMAR GUPTA Esq.,
B. COM., VISHARAD,
5, Chahchand, Allahabad.

THE modern student, whether it be a boy or a girl, even of a comparatively lower class, reads or is at least expected to read a large number of subjects comprising the course of studies clearly undreamt of by his or her revered forefathers. The range of feats accomplished is rather striking and one wonders if it does not include all the blessed subjects on the face of this earth minus sexology. If, however, there is an all important subject which must needs find a place in the syllabus of courses for boys and girls reading in about the 7th and 8th classes, it is sexual knowledge, and if ever there was great need of knowledge pertaining to sex, it is now.

Sexual knowledge does not only mean, as the name implies, a knowledge about the working of the hidden treasures of the two sexes in relation to each other but also includes a knowledge about the principles of "Brahmacharya," propounded by famous ancient Indian sages whose names cannot be obliterated from the pages of history. Let it not for a moment be understood or supposed that it is some obscene thing that is the subject matter of sexology.

Naturally the sexual organism—so vital a part of human system—of men and women falls to be learnt by the students under this subject. Self restraint, which means life, and excesses involving any kind of unnatural phenomenon, which mean death, further come within its scope. Sexology, in short, attempts to clear out all mysteries of sex which hover over the minds of persons.

No one can deny that the present is a terrible age and that the very basis of the present day civilization is wrong. Boys and girls, quite in their infancy, from their pernicious surroundings and environments, get plenty of excitement which they find it impossible to resist and to which they succumb unknowingly in the beginning but much too willingly later on for which, when there is no redemption, they suffer beyond any measure. The effects of bad company are so ostensibly visible that as soon as children are able to read and write a little, say at about the age of ten, they begin writing the so called love letters, compose a few odd stanzas called poems and talk like their grandfathers. Not one out of ten cases can be had where one may stumble against real love and true friendship, the pity being that not even an endeavour is made to distinguish between the genuine affection and fictitious passion. There is a continuous chain of dirt all round, dirty thoughts and everything that is low and base.

Every single boy's age is most delicate between the years of 13 and 18 when the drama of love, which is play for sometime but soon, as the boy grows, changes into something more, is enacted in his life. Boyhood itself is thus a critical and dangerous period. If like the West, boys do not get the company of girls and girls that of the boys, boys here have with the boys and girls also contrive

somehow for themselves. What happens is that simple children are first motivated by an inner urge, an inkling of passion, a desire to unfold certain more or less secret matters and on their failure to do so become fullfledged rogues or bastards. The fire in them is enflamed, their quite nature becomes turbulent, there is tide in the sea and, learning tremendously quickly, they find ways out for themselves. It follows that undoubtedly the greatest necessity of the decked out student world of India in the present age is that their personal lives should be well directed, and that is possible only by giving them sexual knowledge. The trouble is that the modern teachers are a hopeless lot and do not understand their duty towards the children to be able to guide their destiny, their parents do not realise that a living soul is a valuable thing and society at large also seems to feel no obligation whatsoever.

Keeping "Brahmacharya" as the aim of life, India in the days of yore had regulated schools called Gurukuls, conducted by eminent Gurus, unlike the present day educational institutions whose sole purpose is to teach the students many books and make them capable of earning only a few rupees, conduct and character not receiving their due. The principles of "Brahmacharya" of those days were only instructions in sexology, pure and simple. None can labour or deny that "Brahmacharya" is a wide term and means the concentration and best use of one's powers, that it is an essential for all round human development, and that it is upon its foundation that the progress and well being of men and the community depends. "Brahmacharya," so also a study of sexology, strengthens muscles, builds tissues, vitalizes nerves and adds grace and charm to the face. Except of course at a heavy price, children cannot be left ignorant of the fact that preservation of semen, forming as it does in a small quantity from a very large quantity of blood, is a task of prime importance in life inasmuch as semen is the whole substance of a man's body and by the utilization of which in the body both strength and knowledge get an impetus. Loss of semen—either intentionally or through night pollution popularly styled the system of wet dreams—is, as can be deduced, a highly dangerous thing. For the former, as also for the latter, only a sort of effective control over the five senses can check the loss and bring about the desired result. Sexology tends to remove the fallacy that wet dreams are desirable in the event of their being very few and far between because after all firstly it is inconceivable that nature could, in this way, be so extravagant and secondly that it would choose such an irregular and wasteful way. Every result has a cause behind it and one

has it from sexology that weakness in the nerves consequent upon masturbation or other excesses, corrupts the state of mind or over-eating during night leads, to it. No amount of medicine would do and in order that the disease may be cured the causes of it referred to above will have to be remedied. Small children tend to grow bad easily, and to save them from going to dogs relevant knowledge referred to above is indispensable.

Then the question arises whether sexual knowledge is a secret subject. An examination of that question, however, does not detain one at all because obviously the productive organs are like any other sacred and useful parts, e.g., liver, spleen, stomach, etc., of a man's body. A knowledge of the different organs of the body, in spite of its being very necessary, is considered dirty and secret because some immoral persons have misused those organs for their selfish ends. Suffice it to say, why should not the innocent chaps be made conversant with sexology so that they may profit by it and be warned from learning a good deal from their immoral friends, unscrupulous servants, indecent jokes, vulgar literature and sensuous pictures.

By the impartation of sexual knowledge, therefore, serious consequences can be averted.

ed and those very boys and girls who might well have been the victims can be excellent torch-bearers capable of saving hundreds and thousands, who would come in their way. No more would it be necessary first to suffer and then to employ the experience gained thereby in good stead. The newly married young men friends have often been heard saying that women want only sexual intercourse, otherwise they take their husbands to be impotent. Nothing sexology would teach, is farther from truth than this. Excitement is met with in plenty and will be removed if only we know that too much of it leads to impotency. The parents and teachers whose responsibility it is, but who are the worst enemies now, will be our best friends then, and so also our physical, mental and moral success ensured. The study of sexology would enable us to read only good books eschewing the bad ones, to labour hard for fixing up the daily routine, to form habits with firm determination and to throw off all cares and anxieties. The mind thereby would not be vacant but absorbed in work. Make, therefore, sexual knowledge compulsory for boys and girls of 12 years of age and onwards and they will cease to be pale-faced, narrow-chested, blind weaklings with sunken cheeks and haggard looks.

NOISE IS MORE THAN A NUISANCE

Elizabeth M. Cross

NOISE is more than a nuisance; it can be definitely injurious to health. What is more, the increasing noise of modern civilization is affecting almost everyone. In earlier times we had sufferers from noise in certain industries and in the towns, but it was possible to seek some quiet in the country. To-day, with the ever-growing air and motor traffic there is very little quiet to be found anywhere.

Considerable research has been done on the subject, notably by Dr. W. E. Cannon of Harvard, who found that certain noises had an effect on the digestive functions; by Dr. Foster Kennedy who has studied the effect of noise on brain pressure, and Dr. Charles Warren who noted changes taking place in the ears. He found that certain noises, particularly of continuous types (also fluctuating but continuous, such as noisy traffic) can exhaust the hearing nerve and also cause a stiffening of the movements of the small ear-bones, as a result of which, in both cases, gradual deafness results. Thus one gets "occupational deafness" such as is common among taxi-drivers in noisy cities. In addition to deafness, or before deafness supervenes, there is often a sense of frustration and annoyance which, in turn, adds to the nervous indigestion.

Other effects of noise are less easily defined, but there seems to be some foundation for the belief that the strain may help cause some mental ailments. Certainly it is true to say that the mere effort, although frequently unconscious, to ignore noise and concentrate on the work in hand, causes sufficient strain to upset the nerves and generally overexhaust the system.

Degree of noise.—Sufficient evidence has been accumulated, it is clear to prove the bad effect of noise and to show the need for a determined effort to minimize in general. Research has been carried out too on the actual measurement of noise, so that it is possible to know just how much is actually is! For instance, taking comparative silence, or a quiet whisper as a unit of sound, a noisy aeroplane is 110, a motor horn 90, accelerating traffic 80, and a steam train 100.

It certainly seems a matter of first importance that work shall continue in finding how to make the town a quieter place, for it is obviously extremely harmful to city workers to be subjected to such a barrage of noise on their necessary journeys, particularly when we find that a noise rated at 60 can cause nervous indigestion.

What is needed is a campaign against noise, out-of-doors bleeding and traffic, including air traffic, and indoors, against domestic noise from radios, sets, barking dogs, banging doors, household pots and pans, and so on.

Every effort is being made by The Noise Abatement League, of 115, Tower Street, W.C.1 to educate the public in the ways of quietness. In addition to propaganda the League does much good work in promoting research into matters of better building that will make homes quieter, and also into ways of silencing noises at their source (such as the fitting of silencers to machinery and so on). Much good work has been done in building, so that it should be possible for the homes, (particularly blocks of flats and terraced

houses) to have walls and floors of non-sound-conducting materials. It is more difficult to overcome air-borne noise through windows, for any method of ventilation that cuts out noise is, as yet, complicated and expensive. Thus it remains urgent to try to cut down street noises and any noise that will pass to a neighbour. It has been proved that hedges and trees can screen off a good deal of noise and it is hoped that houses or flats built near busy roads can be stepped back so that room can be made for tree planting. Such planting is beneficial to health in many ways besides cutting down noise.

At the moment the two most serious noise problems come from the aeroplane and the road drill, although motor traffic can be a great nuisance. Motor traffic, however, is improving and can be further improved by the elimination of old and almost worn-out vehicles and the introduction of more and more silent models. It is a pity that so little use has been made of electrically driven vans and cars, for they are by far the quietest. So far the difficulty has been that they cannot travel for any length of time without re-charging, or there is the need of contact, as in the case of the trolley buses.

Problem of air travel.—Traffic in the air is a serious problem, although we are promised that high flying will be the rule, and that this will mean little noise. Those living within a good many miles of airports, however, will suffer greatly. Perhaps the chief annoyance now is the training planes which fly low and over fairly small areas causing much nervous

exhaustion to those living in their area. As there are so many training aerodromes all over England, very few people escape this form of torture. There seems little reason why such aeroplanes could not be fitted with more efficient silencers, as it cannot be argued that the loss of speed would be of importance, or that the expense is prohibitive. Expense has been argued as a reason against employing the most silent road drill yet devised, but this seems to be penny wise pound foolish, for the effect on public health of the noisier types is probably far more expensive than the silent drill would be.

Noise is one of our most serious problems to-day, and it is one that is too often neglected and forgotten because its evils and dangers are not at first apparent. The effect of noise is cumulative and insidious, gradually impairing the hearing and upsetting the system in ways that may not always be attributed to the real cause. One of the most dangerous and least spectacular effects of constant noise is that general fatigue that causes loss of output at work and lack of resistance when illness appears.

Noise is an enemy and must be combated by everyone. We can do much in our own homes by taking reasonable care and also by making use of insulating materials, soft furnishings, and other means of minimizing noise. We can also make our opinions known in public and help by supporting any movement toward achieving quiet in general. It is a matter of health as well as comfort.—*Good Health.*

How Does the Thermometer Affect You?

LEE GILMORE

HALF the dread of summer experienced by thousands of people every year is based on erroneous information and false impressions. The tendency seems to be to ascribe all deaths that occur in summer to the heat.

We hear a lot about summer colds and summer dysentery, but these terms are misleading. Colds are far more common at other seasons (and more dangerous), and heat has nothing to do with dysentery, except indirectly. The disorder comes from contaminated food and intestinal indigestion, though, of course, food spoils more quickly in summer.

"Well," insists the complainer, "I may not die of sunstroke, but it is undeniable that the summer is a punishing time to get through."

Mental attitude and bodily temperature.—Usually, if we fear a thing and expect it so confidently that we go half way to meet it, we get it. Most of the people who suffer intensely in summer begin their suffering in anticipation weeks before the heat arrives. They work themselves into a nervous, apprehensive state that opens up every possible avenue to the establishment of the very condition they fear.

That mental attitude and bodily temperature are closely related, has been recognized time and again. This is proved by

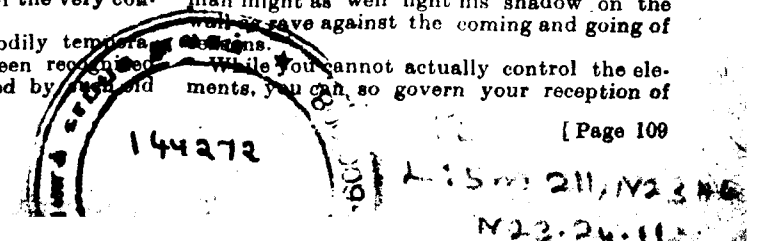
expressions as: "He felt his blood run cold," "Don't get hot under the collar," etc.

Any emotional excitement, such as anger, resentment, and nervous irritation, affects the circulation, not by a real stimulation but a stagnation that leaves the extremities cold. When a person is angry, his cheeks flush and the veins in the neck become swollen. He is literally "hot under the collar." You produce the same result when you shout fiercely, "I simply can't stand this heat!" You are resentful, angry, nervously irritated. And, largely because of this state of mind, you produce a sort of internal heat of your own.

Intolerance, the fuming and fretting attitude toward weather, becomes a habit. Often the same person who endures real hardships and misfortunes with admirable fortitude becomes terribly exasperated over a little heat, and raves as though determined to vent all the vituperation dammed up in other channels of his daily life on the weather.

Such an attitude is foolish, even ludicrous. As I have tried to show, it increases our discomforts, adds easily combustible fuel to our internal fires; but even if there were no such positive effects, the resentment is useless. A man might as well fight his shadow on the wall as rave against the coming and going of seasons.

While you cannot actually control the elements, you can so govern your reception of



conditions as virtually to do so. No person who is living intensely, who is busy and happy will have any quarrel with the weather. He who has normal instincts born of sound mental and physical health enjoys all the seasons. Enjoying each season, welcoming it as a refreshing, healthful change and an opportunity to do things not so easily accomplished at other times, will help greatly to kill the bugbear of seasonal unhappiness.

When a lad I lived where extremes were the rule—hot summers and cold winters. One of our neighbours, a devout believer in suggestion without knowing a thing about the science, had two sets of pictures for the

living-room in her home. In winter she hung up views of summer scenery and activities; and in hot weather these gave place to snow scenes, frozen streams, icicles, polar bears, sleighing parties, and such. Why not try it, it will help.

When you feel yourself getting too hot, try to visualize an opposite situation—imagine that you are on the peak of a snow-clad mountain, the unprotected target of cutting northern blasts; your ears and nose are freezing, your hands blue with cold. See the thing in detail, and shudder as though with cold. It will not be long until you are decidedly cooler. —Good Health.

Tobacco, Friend or Foe?

THE EFFECT OF TOBACCO ON THROAT AND LUNGS

LESTER H. LONERGAN, M.D.

DO you remember the testimonial advertisements regarding the mildness and the soothing properties of certain cigarettes? And do you believe them? Dr. Arthur H. Steinhaus tells us Martinelli's experience. When this great singer insisted that reporters stop smoking in his presence, they reminded him that these were the very cigarettes he had endorsed. His reply was something like this: "It is true. Gasps never hurt my throat, because I never smoke them." Apparently the Federal Trade Commission is not so easily convinced by such advertising as is the general public. The FTC charged that many such statements used are false; that testimonials are often written by the manufacturer and not even read by the one whose signature is used. Blake Clark (*Reader's Digest*, July, 1943) confirmed what we had suspected for a long time. "Interviews with athletic champions and other testimonials reveal many who received a \$1,000 'lift' from the makers of Camels, but who do not smoke Camels; and some who have smoked only a single cigarette—the one they held while being photographed."

Substances in tobacco smoke responsible for the irritation produced in the throat and bronchial tree are (besides the heat of smoke itself) pyridine, ammonia, and nicotine, but especially the tars and resins—yellow-brown products of combustion, easily seen when a cigarette is puffed through a handkerchief. These tars are present in amounts usually over 2 per cent in cigarette smoke. Glowing cigarette-testimonial advertisements do not change the fact that smoking does produce an inflammation of the pharynx and larynx, with an associated hacking cough. This irritation is no less when those cigarettes are used which possess the "cooling" influence of added menthol. This drug, rubbed over a small area of skin, will indeed produce a cooling sensation, not because the local temperature is any lower (for the skin temperature is actually higher), but because this slightly irritant drug has the peculiar ability to stimulate the nerve endings which carry

the sensation of cold. The smoke from menthol cigarettes may seem cooler. Actual test indicates otherwise, and the irritation produced is no less.

Major Gerald B. Webb has presented further evidence of this tobacco irritation. Among 3,288 soldiers examined, the majority of the smokers of the group showed evidence of bronchial irritation, by rales. In most non-smokers no such evidence was observed. Note his figures:

Among 2,632 smokers, those with rales numbered 1,883 (71.5%).

Among 656 non-smokers, those with rales numbered 177 (27%).

In other words, this evidence of bronchial irritation was found among the smokers over two and one-half times as frequently as among the non-smoking group.

This irritation was studied by Drs. Short, Johnson, and Ley, among 2,031 insurance policy-holders, at the time of their periodic health examinations. Among the smokers of this group, nearly twice as many gave a history of frequent colds as among the non-smokers (18% of 1992). Over two and one-half times as many smokers showed evidence of irritation of the nose and throat. (6.4% of 2.4%), and four times as many were troubled with cough (6.4% of 1.6%). Among the 139 of this group who had discontinued the use of tobacco the single symptom listed most frequently as the reason for its discontinuance was "irritation of the respiratory passages."

An excellent study of the relationship of tobacco smoking to complications of the lungs after abdominal operations was reported by Dr. H. J. V. Morton, at the Hillingdon County Hospital, Middlesex, England. A total of 1,257 adults undergoing abdominal operations were studied. These were divided into three groups:

(1) Smokers (over ten cigarettes, or one-half ounce of tobacco, daily); (2) light smokers; (3) non-smokers. Following surgery, the pulmonary complications, such as bronchitis and broncho-pneumonia, were reported as follows:

	Complication Rate	
	Men	Women
Smokers ...	(175/300) 58.3%	(14/23) 60.9%
Light smokers ...	(57/180) 31.6%	(14/62) 22.5%
Non-smokers ...	(5/66) 7.5%	(55/518) 11.2%

"It is clear that the effects of smoking are an etiological [causal] factor of great importance. Not only is there great disparity among the bronchitis groups, in which some variation might be expected, but also in the more serious complication groups."

"The combined figures for all types of abdominal operations show that the morbidity rate for smokers taking more than ten cigarettes, or one-half ounce of tobacco, a day, is about six times that for non-smokers."

"Smokers are more likely to develop complications associated with serious constitutional disturbances." As a result of this continued irritation, there sometimes is produced a change in the mucous lining of the mouth, known as leucoplakia, which is characterized by the appearance of silvery-white, hardened patches on the mucous membrane. There were reported 316 such cases by Dr. Francis P. McCarthy, who found tobacco to be by far the most important factor in its cause. And need we be reminded of another related fact—that prolonged irritation, though not the only cause, is one of the most important factors in the production of cancer? These silvery-white patches of leucoplakia, occasionally seen in the mouth of the smoker, may break down and undergo cancerous changes.

Drs. Freidell and Rosenthal studied eight cases of cancer of the mouth which developed after prolonged use of chewing tobacco at sites corresponding exactly to the areas in which the quid was held. They state: "In addition to the actual neoplasm [the cancerous growth], there were widespread areas of leucoplakia surrounding the tumour and partially covering its surface.... The leucoplakic changes are probably precursors [forerunners] of the actual neoplasm and represent the earliest changes. This is well illustrated in two subjects who transferred the quid from one side of the mouth to the other, after the developing lesions become too painful. In both instances, patches of leucoplakia appeared at the new sites."

At the University of Michigan, Wild and Hand studied 425 cases of lip cancer. In many of these cases, the tumour appeared on the site of the smoker's patch where the pipe had rested for years. In an address by the noted pathologist, Dr. Ewing, appears this statement: "Among preventable cancers, the most obvious is the intra-oral [mouth] group.... The use, and especially the abuse, of tobacco must be charged with a large share in the production of intra-oral cancer as well as of cancer of the larynx.... One may hardly aim to eliminate the tobacco habit, but cancer propaganda should emphasize the danger signs that go with it."

Roffo, at the University of Buenos Aires, showed that these tars which are present in the smoke contain a substance, benzopyrene, which causes cancer when applied to the tissue of experimental animals.

In a study of this cancer-producing compound, by E. J. Grace, is this comment: "In general discussions concerning the preventive aspects of disease, one must be appalled by the unbelievable indifference with which the profession as a whole approaches the problem of heavy smoking, and its potential dangers. In spite of increasing literature on the subject in which the possible connection of various disease entities with the absorption of toxic products from smoking is mentioned, there exists an apathy on the part of the profession which gives no great credit to our clinical acumen. This lamentable indifference is probably accentuated by the fact that about 80 per cent of the profession smoke and *ipso facto* the habit must be justifiable and be commendable. Such evidence, occasionally quoted by so-called authorities, and frequently backed up by commercial associations, is absolute rubbish and represents either abysmal ignorance of the magnitude of the problem, or purposely compromises a philosophy of good medicine.... The vaso-spastic [blood vessel constricting] action of nicotine is well known, but tar is a more dangerous element, probably of infinitely greater significance, because in this clinical compound, we have all the potential elements which are capable of producing malignant tissue changes."

I. H. Pierce, at the College of Medicine, State University of Iowa, demonstrated that of the total tarry solids inhaled in smoke of a single cigarette, approximately 68 per cent or 18 mg., were retained in the body. This means an added burden of .36 gm. per pack, or at the rate of a pack a day, over a quarter pound per year of these irritant tars and resins loaded on to the delicate mucous lining of the throat and lungs. Hence, with the marked increase in the use of cigarettes within the past three decades, we should not be too much surprised at a corresponding increase in primary cancer of the lung, reported by physicians in widely scattered areas of the United States.

From the University of Oregon Medical School, Drs. Menne and Anderson report an absolute increase in the incidence in recent years, and emphasize the probable role of tobacco smoke as a cause. Dr. William Boyd points out that the word-wide character of the increased incidence has been "phenomenal.... during the last twenty-five years."

Dr. Chevalier Jackson, of bronchoscopy fame, reported an increase in cancer of the larynx and of the lungs of approximately 21 per cent and 37 per cent respectively, for the period of 1934-38. He states "From our record, we can make the parallel statement that the proportion of smokers among patients with laryngeal cancer is very high.... This etiologic factor is important in relation to the study of incidence, because, in our experience, the proportion of men with cancer of the larynx to women with this lesion is ten to one. Among our patients about 95 per cent of the men were smokers of tobacco. Now that smoking among women is becoming deplorably common, it will be interesting to note in the future the relative incidence in women."

Topics from Medical and Health Periodicals

Fowls harbor encephalitis.—Fowls, domestic and wild, have been found to be the principal reservoir of the virus causing St. Louis encephalitis or sleeping sickness, according to the *Science News Letter* (Vol. 49, p. 82). An extensive investigation was carried on by scientists of the University of California. They learned that the mosquito was the only insect carrier of the virus, which it receives from fowls and passes on to men and horses. While men and horses may suffer severely, the birds show no symptoms. Human encephalitis occurs mainly in rural areas and in the suburbs of large cities where chickens are kept. Major epidemics broke out in the Yakima Valley, Washington, in 1911-42, and in Kern County, California, in 1943.

Preventing tooth decay.—Hope that tooth decay may be prevented by the use of a mouth rinse or tooth-powder containing ammonia appears in a report of four scientists of the University of Illinois, U.S. submitted recently at a meeting of the Chicago Dental Society. The ammonia used is not of the kitchen or medicine-chest variety, but in the form of diabasic ammonium phosphate. In the mouth of test patients it produced a marked reduction of *lactobacillus acidophilus*, the yardstick of susceptibility to tooth decay.

Another method of reducing tooth decay by 60 to 90 per cent was found in chewing gum fortified with vitamin K. Tests conducted at the Northwestern University Dental School at Chicago proved that synthetic vitamin K is most effective immediately after meals, and must be dispersed throughout the mouth, for which chewing gum appeared as the most effective media.—*USIS*.

New treatment for boils.—Twenty-minute alcohol rub.—Complete, usually sudden and apparently permanent cure of boils by a new treatment consisting simply of a twenty-minute alcohol rub is reported by Dr. Philip B. Price, of the University of Utah School of Medicine.

Dr. Price makes no claims for the method of treatment, he says, since the number of cases in which it has been used is too small for final conclusions as to its efficiency. Of many patients given this treatment in the last ten years, he reports on eleven. All of these had a more or less continuous succession of deep-seated boils occurring over a period of weeks or months. All had been treated unsuccessfully by other methods. All were followed for two years or more after the alcohol treatment. None had any further boils during this period.

The treatment should be given in the interval between the healing of the last boil and the onset of the next one. Dr. Price advises. The rubbing is done gently with gauze.

solution of ethyl alcohol 70 per cent by weight, not volume, is used.

The treatment is based on Dr. Price's belief that one boil follows another because germs of the first one are smeared over the skin surface by discharges, sweat, bathing, and friction. They become part of the germ population that resides permanently on the skin. There they may live and multiply without harm until by chance some of them are rubbed deeply into a hair follicle, whereupon a new boil develops.—*Oriental Watchman*.

Confession is good for mind.—A woman given unduly to worrying herself into a condition of so-called "nerves" over trifles, asks how relief can come from talking over her fears with a psychologist and stranger.

PSYCHOLOGICAL ADVICE: In most cases a good, experienced psychologist will prove to the worried individual that the nerves are quite all right, and he will show that it is the negative, incorrect messages sent over the physical telegraph wires (nerves) that set up disorder and "symptoms" in the body. Through trained method, system, and technique he will so conduct the consultation that although the conversation appears to be just a talk, he is skillfully drawing out the real, reliable clues leading to a revelation of the actual causes which have produced the effect. Thus, so very often, for the first time the worried, anxious, and perplexed man or woman sees, realizes, and understands just why he or she has been tying up trivial minor factors with some deep, past, old experience of a more serious nature. Then he will induce the person to a realization that the past is past, and that the reaction is a kind of fantasy and, as such, can be wholly eradicated. "If only I could talk it over with a sympathetic, understanding person. How frequently one hears this said. Yes, but sympathy and understanding of the reasons for distress of mind can go only so far and no further. What is essential for a real and lasting readjustment is experienced knowledge enabling the consulting psychologist to give a sound, proven plan of guidance leading to remedy; not mere "what you should do," but "how you will do it." You see, a trained psychologist can "sense" more than you would imagine possible from things more significant than your spoken words. Your eyes, mouth, posture, especially your hands, and your delayed reaction time in replies reveal much. You sound as one who does not care for the idea of a "confession." All right, then you will continue to drive unpleasant experiences into the sub-conscious area of mind where these will "nag" and tinge and all your actions, or inhibit action. That is how you lose your peace of mind.—*Health For*

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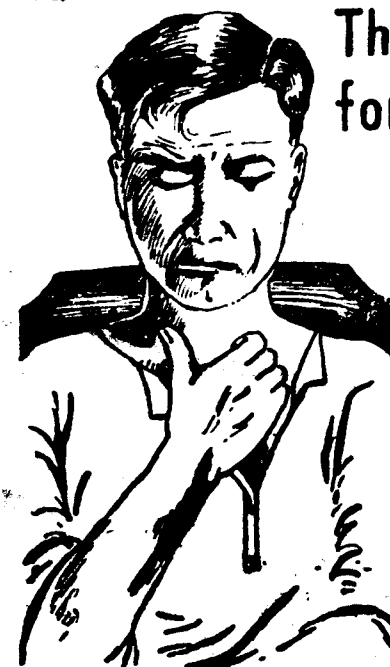
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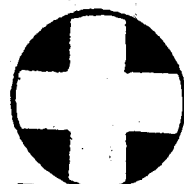
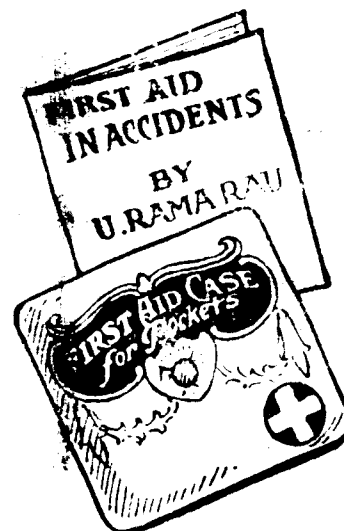
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