# REVIEW OF REVIEWS OF THE PORTO RICO HEALTH REVIEW

### NO DIPHTHERIA IN NEW YORK STATE IN 1930

Dr. Lee K. Frankel, second vice-president of the Metropolitan Life Insurance Company, gave an interesting lecture on May 5, 1925, before the State Committee on Public Health of the New York State Charities Aid Association, which has been published in pamphlet form under the above suggestive title.

Dr. Frankel bases his prophecy that there will be no diphtheria in the State of New York by 1930, upon the achievements of the past in the control of the disease, and upon the efficient methods of control used at the present time. He proves that the death rate from diphtheria has been steadily declining since the discovery of the Schick test and toxin anti-toxin in 1918. In New York State the death rate from diphtheria dropped from 20 per 100,000 in 1919 to a rate of 9.9 in 1924. He believes this to be due to the fact that since 1920 more than one million school children and many thousands of children of pre-school age have been Schick-tested, and more than one-third of these have been immunized with toxin anti-toxin.

Dr. Frankel concludes that extensive immunization by the use of toxin anti-toxin in all children above six months of age will result in the eradication of diphtheria from the State of New York by the year 1930.

## MORTALITY IN THE STATE OF MICHIGAN

The general mortality rate in the State of Michigan during 1923 was 12.8. The most important single cause of death was organic heart disease, which was responsible for 13.4 per cent of the total number of deaths. Apoplexy was second in importance. Cancer was fourth and tuberculosis sixth. Mortality from this last disease has been decreasing steadily due to better sanatorium and hospital facilities and an intensive educational campaign.

Deaths from automobile accidents numbered 674.

The birth rate was 24.1 per one thousand estimated population.

—Michigan Public Health.

#### DEATH RATES IN ILLINOIS DURING 1924

Pneumonia and tuberculosis were the chief causes of death in Illinois during 1924. Pneumonia killed 5,818 people, while tuberculosis was credited with 5,581 fatalities.

The tuberculosis death rate in Illinois has declined from 130 per 100,000 population in 1902 to 81.2 per 100,000 in 1924.

-Illinois Health News.

#### VITAL STATISTICS IN CONNECTICUT

The death-rate in Connecticut during the month of March, 1925 was 13.3 per cent.

The infant mortality for the first quarter of 1925 was 91.8 per 1,000 living births.

## ANTI-LEPROSY WORK IN THE PHILIPPINE ISLANDS

Different preparations of chaulmoogra oil were used in the Philippine Islands during the last few years as a means of determining which of them is most efficient in the treatment of leprosy.

Four thousand five hundred patients of the Culión Leper Colony are now under treatment. The patients have been subdivided into six sub-groups, according to the kind of treatment employed. The following preparations were used:

- Sodium gynocardate "A" (Hydnocarpate of Rogers). The sodium salts of chaulmoogra oil fatty acids which have been recrystalized from alcohol. The mixture of acids used melts at about 37° C.
- Sodium gynocardate "S". The sodium salts of the total fatty acids of chaulmoogra oil.
- Sodium Morrhuate. The sodium salts of the fatty acids of cod liver oil.
- 4. Chaulmoogra emulsion "S" (Collobiasis substitute.) An emulsion containing 0.72 grams of chaulmoogra oil and 14.4 grams of acacia per liter.
- 5. The Mercado mixture, prepared according to this formula:

Camphorated oil	10 per cent
Chaulmoogra oil, sterilized as	60 e.c.
Resorcine	4 gms.
Ether	2.50
M. S. For intramuscular injection.	

6. Collobiasis (Daussé).

The gynocardate of chaulmoogra, in 3 per cent solution, and the sodium morrhuate were given by the intravenous method.

The chaulmoogra emulsion, Mercado mixture, and ethyl esters, were given by the intramuscular method. All preparations were given twice a week, except the Mercado mixture which was given once a week.

As a result of these various treatments, 133 patients were paroled as negative in the Culion Leper Colony during 1922 against 53 in 1921, and 31 in 1920.

The Treatment Committee which is making these therapeutic experiments at Culion has reached the following conclusions:

- 1. The trend of the present investigation appears to be in the right direction, and it is believed that still more positive results may follow the judicious application of the methods and preparations now at our command.
- 2. The patients appear to improve on any of the chaulmoolgra oil derivatives, but in the course of treatment, a stage is reached whereby no further clinical improvement is observed.
- 3. At this point, unscientific as the procedure may seem to be, the Committee on treatment, has invariably recommended a change of treatment, and it was observed that this was always followed by further improvement, tending, in many instances, with the complete disappearance of all the cutaneous manifestations and the clinical cure of the disease.
- 4. That the growing response to the treatment appears to be dependent upon the amount of the drug absorbed in the system.

-Monthly Bulletin of the Philippine Health Service.

## TUBERCULOSIS IN THE PHILIPPINE ISLANDS

The annual death rate from tuberculosis in the Philippine Islands is 297 per 100,000 population. Twenty-nine thousand seven hundred and forty-two people died from this disease in the islands during the year 1920. In Manila, 17.6 per cent of all deaths are due to tuberculosis.

Dr. Carmelo Peñaflor in an article published in the Bulletin of the Philippine Health Service, considers "lack of proper hygienic education among the great masses of the population" as the outstanding cause for the spread of the white plague. He suggests an intensive educational campaign by means of "travelling clinics, exhibitions, contests, posters, publications, etc."; establishing of adequate hospital facilities for advanced cases of tuberculosis, and sanatoria for incipient cases; establishing of public tuberculosis

dispensaries, and the training of physicians in the early diagnosis of the diesase.

## HEALTH CERTIFICATES BEFORE MARRIAGE IN LOUISIANA

The legislature of Louisiana has recently passed a law making it compulsory for any male applying for a marriage license to obtain from a licensed physician a certificate showing that he is free from venereal or other constitutional deseases.

Other states requiring a physical examination and a clean bill of health before marriage are North Carolina, Oklahoma, Pennsylvania, Indiana, Michigan, Oregon, Alabama and Utah.

-Bulletin of the Louisiana State Board of Health.