

REVIEW OF REVIEWS

By J. RODRÍGUEZ PASTOR, M. D., Chief of the Bureau of Tuberculosis

VENEREAL DISEASE AMONG DEFECTIVES

The high incidence of venereal disease among the inmates of institutions for defectives is stressed in an article that appeared in the May number of *Venereal Disease Information*, a monthly bulletin issued by the United States Public Health Service. According to the 1925 annual report of the Surgeon General of the United States Public Health Service, 8,108 patients with syphilis, gonorrhoea and chancroid were admitted to thirty-nine correctional and penal institutions in the United States. The incidence of venereal diseases in institutions of this kind is usually very high. In a group of 1,518 inmates at San Quentin Prison, states this article, 10.93 per cent were found to be syphilitic.

“At this institution anti-syphilitic treatment is compulsory. Among the prisoners at Sing Sing Prison it was found that twenty-one per cent of the inmates were syphilitic and sixty per cent suffered from active gonorrhoea. Among a group of 3,000 prisoners in the State of Alabama thirty seven per cent of negro women, twenty-five per cent of negro men, and fourteen per cent of the white men showed positive Wassermann reactions.”

“From January, 1918, to June, 1922, routine examinations made upon admission to the Georgia State Sanitarium showed 857 positive blood Wassermans and 310 positive syphilitic spinal fluids. Of all admissions about eighteen per cent showed positive blood Wassermans, more than 7 per cent showed positive spinal fluids, and 6.7 per cent of positive spinal fluids were associated with negative blood Wassermans.”

Discussing the incidence of venereal disease in European countries, this article mentions Fischer, who estimated that there were about 125,000 syphilitic patients in German penal institutions every year.

The German government has endeavored to render all prisoners free of infection, and has tried to get the support of the national sickness insurance institutions to this effect.

CLEANEST-TOWN CONTEST

A contest was recently held in Texas, to determine which was the cleanest town in Dallas County. An inspection of all the towns of that county was made by a judging committee, the final decision to be based on a scoring system including the following items:

- Disposal of trash and garbage and garage junk.
- Conditions of toilets.
- Fire hazards.
- Drainage of ditches and elimination of mosquito and fly-breeding places.
- Dairy sanitation.
- Cleanliness of cafés, restaurants, markets, drug stores and hotels.
- Freedom of streets and alleys from trash and weeds.

The decision of the judges favored the town of Richardson, which was thus proclaimed the cleanest town in Dallas County, Texas.

Contests of this kind are a great incentive to the improvement of sanitary conditions in towns, and they will probably be repeated in other parts of the United States.

We should like to see such contests held in Porto Rico.

—*Hygeia*.

 PROTECTION AGAINST BOTULINUS POISONING

The following rules as to the ways of defecting spoilage in canned goods, appeared in the last number of *Hygeia*, and were taken from a recent bulletin of the U. S. Department of Agriculture:

1. Never taste canned food to determine whether or not it is spoiled. One mouthful of food contaminated with *Bacillus botulinus* has caused death.
2. All canned food should be examined by other methods, however, before it is used. In tin cans, both ends should be flat or curved slightly inward. Neither end should bulge or snap back when pressed, and there should be no trace of leaks at the seams. The same holds true of glass jars.
3. The contents of the can should appear sound, the liquid clear. There should not be any outrush or spurting of air or liquid when the can is opened. The odor should be characteristic of the food. An "off" odor would indicate spoilage. If the food is in tin, the color should be normal, and the tin can itself should be smooth and clean and well lacquered, not extensively blackened or corroded.
4. Spoilage due to botulinus is hard to detect. It is therefore best to boil all canned vegetables and meats for ten minutes at least, before they are tested. If necessary, boiling water may be added to cover the food while boiling it. The hot food should be carefully smelled, as heating sometimes brings out an odor of spoilage not noticed when the food was cold. Canned goods that show

signs of spoilage should be carefully destroyed. Botulinus toxin will kill animals as well as human beings.

5. In home canning, the cans should be held at room temperature for a week or ten days and watched for signs of spoiling. If no defects show up in this period they may be stored at a lower temperature.

6. One should can only the surplus fruit and vegetables. Fresh fruit and vegetables should be used as much as possible; one should never can what might be used fresh. It is poor economy to cut down the use of fresh food in order to have a supply to can.

KILLING MANY BIRDS WITH ONE STONE

In no line of endeavor are there so many opportunities to kill two or even a dozen birds with one stone as in health work, says Dr. Thurman B. Rice, director of the Bacteriological Laboratory of the Indiana Health Department, in an article written for the Bulletin of the Indiana State Board of Health.

“Let us suppose that typhoid has the public attention. We shall attempt to clean up typhoid. In doing so”, states Dr. Rice, “we will look well into the matter of securing pure water; we will demand clean or pasteurized milk; proper sewerage and garbage disposal will be arranged, and a general campaign which results in screened houses and privies, cleaner houses and stores and kitchens is set on foot; attention will be paid to dirty stables, alleys and commons. What are the results? A decline in typhoid, to be sure. But much more. There is a marked improvement in general health, a lowering of the general death rate, and particularly of the infant death rate. Dysentery, cholera morbus, cholera infantum, ‘summer complaint’, food poisoning, paratyphoid fever and other gastro-intestinal disorders are prevented by these means quite as effectively as has been typhoid. The money saved in doctors’ and undertakers’ bills, in increased efficiency as a result of the decreased illness, will probably pay for the improvements many times. We have, besides, avoided the pain, death, worry, sorrow and distress which are necessarily the accompaniment of these diseases; we have prevented tuberculosis, gall-bladder diseases and many other injuries to bowels, kidneys, heart, blood vessels and other organs, which follow typhoid; we have prevented our neighbors and ourselves from becoming carriers capable of being foci of infection for other communities; we have beautified our surroundings, and made life more pleasant in that we now have the satisfaction of knowing that we are cleaner than we were, are no longer drinking sewage in our water and milk, are not compelled to pass through alleys filled with decaying garbage and swarm-

ing with flies. Life is safer and sweeter than it was before the clean-up campaign waged in the effort to eradicate typhoid.

“As a result of the great effort made to stop the Hamburg epidemic of cholera the death rates for typhoid and dysentery fell precipitously. The anti-plague campaign in San Francisco was directed mainly against rats, but the clean-up necessary to get the rats resulted in a great decline of the filth diseases, and it was the direct cause of improvement in property values nearly equal to the cost of the campaign. In 1916 New York had a terrible epidemic of infantile paralysis. A most tragic summer for children! But as a result of the increased care and attention given to child health the death rate for children in New York reached the lowest level that it had ever attained and this in spite of the fact that a dreadful epidemic had raged almost completely out of control.

“Hookworm is a definite disease. It bears no primary relation to tuberculosis, typhoid, dysentery, and such other diseases. But when a hookworm campaign is instituted the death rates from these other diseases are immediately lowered. The anemia and malnutrition of the patient with hookworm is the most fertile soil for the germ of tuberculosis. General health is improved by control of the hookworm, economic and social conditions are tremendously helped, schools are transformed, and industry revived, all by the giving of preventive measures. Indeed the course of history can be and has been changed by a program of this kind.

“The anti-malaria procedures are nearly as effective against other mosquito-borne diseases as yellow fever, dengue, and filariasis as against malaria. Besides, there is the greatly increased opportunity for enjoyment because of freedom from the mosquito merely as a nuisance. The land reclaimed by drainage has in many cases been very valuable. The control or lack of control of mosquitoes has on several different occasions had a profound effect upon the course of history. Some students very largely attribute the decline of both Greece and Rome to the incidence of malaria. The Southern States have been greatly held back for the same cause. The Panama canal could never have been dug if such measures as would control malaria had not been worked out.

“Perhaps the best organized of all the health activities is that directed against tuberculosis. We gladly contribute to the fund which supports this work, and we buy Christmas seals willingly because we know that this is a dread and awful disease and that splendid progress is being made against it. But excellent as are these results attained against tuberculosis, it is likely that these procedures are of even

more value against colds, pneumonia and other diseases spread by discharges of the mouth and nose. Fresh air, sunlight, good food, ventilated bed and living rooms, cleanliness, correct personal habits benefit ALL of us and not merely those who may have tuberculosis or are in danger of having it. Relatively small numbers of people are actually pulled from the jaws of death by the direct fight against tuberculosis, but all are helped by the campaign for the reason that it is in the interest of general health."

Mr. Rice believes that in fighting transmissible diseases attention should be concentrated on only three important programs:

1. The fight against tuberculosis.
2. The fight against typhoid.
3. The fight against venereal disease.

In the Southern States (as well as in Porto Rico) two others must be added:

4. The fight against hookworm disease.
5. The fight against malaria.

