

REVIEW OF REVIEWS

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

HEALTH EXHIBITS AT THE SESQUI-CENTENNIAL EXPOSITION

The health exhibits at the Sesqui-Centennial Exposition have been comprehensive and practical, according to Dr. S. Egbert, who writes for the *American Journal of Public Health*.

Models of sanitary and unsanitary farmhouses and surroundings, safe and unsafe wells, a well-planned schoolroom, rat-proofed wharf, ship and granary a delousing station, sewage treatment plant, incinerator, mosquito pupæ and larvæ, samples of standard biologic products, etc., are among the interesting displays made in the exhibit of the United States Public Health Service.

The Children's Bureau also has a very interesting exhibit at the exposition, and a daily clinic for the free examination of children under 6 years is held on the premises. Posters, motion pictures and conferences are among the means used by representatives of the Children's Bureau to explain the work of that institution.

The Pennsylvania State Department of Health has a practical and instructive exhibit:

"A number of illumined graphs showing the respective mortality rates of the more important transmissible diseases flash at short intervals and indicate that a winning fight is being carried on in the state against most of these maladies. Well-planned models of sanitary and unsanitary farms, protected and unprotected wells and springs, old schoolhouses and new, a model tourist camp, a filtration plant, and of a traveling outfit for testing and safeguarding water supplies along the state highways, attract the attention and impart valuable information within a comparatively limited space."

"There is also a display of the serums, vaccines and antitoxins distributed by the department, with a map showing the location of upward of 300 distributing stations, and a laboratory exhibit of the apparatus used for collecting material for the diagnosis of diphtheria, tuberculosis, typhoid fever and malaria, and for the control of narcotic drugs. There are also charts and information regarding governmental and state clinics and dispensaries, photographs of well-nourished and undernourished children, and other items of interest to the passing observer."

"Perhaps the most attractive features of the whole exhibit are a

central Greek temple in which stands Calder's 'Man Club'—a statute of a healthy-looking youngster—and a series of dioramas made up of colored photographs, partially in relief, showing the benefits of heliotherapy and skilled care at the state sanatoria for the tuberculous, of which photographs are also shown."

"In the Palace of Education large and very interesting health exhibits are to be found. Most of them are demonstrations of present-day methods used in the prevention of disease.

The National Organization for Public Health Nurses, and other associations of similar nature have united to present an exhibit which, Dr. Egbert states, is one of the most beautiful in the whole exposition.

"It shows first the various steps in the education of the trained nurse, and then the many and diversified fields in which she finds opportunity for service, these including in addition to the customary home and hospital nursing, those in the Red Cross and the four branches of the federal service—Army, Navy, Public Health Service and Veteran's Bureau—state and county positions, public schools, industry, and church and missionary work at home and abroad. The exhibit also shows the distribution of nurses engaged in public-health work throughout the country and the relative proportion of such nurses to the population in each state, and also twenty-three periodical publications devoted to nursing, these being printed in thirteen different languages."

A NEW APPARATUS FOR OILING PONDS

Hygeia, the Health Journal of the American Medical Association, describes a new kind of apparatus that has been devised by Major W. O. Wetmore of the Medical Corps of the United States Army, for oiling ponds in order to kill mosquito larvæ:

"A conical can with a diaphragm near the bottom contains two chambers. The lower chamber is filled with sand and acts as a weight. The upper chamber contains oil. Both are equipped with a cap for filling. Along the outside is a tube with an inlet at the top and an opening into the oil chamber at the bottom. The apex of the chamber has a wire wick, which permits the oil to escape in droplets."

"When the can is put into the pond, the weight sinks it. Oil begins to escape from the apex while water runs into the lower portion of the oil chamber displacing the oil. A five-gallon can, according to experiments made in Hawaii, kept a pond the size of a city block oiled for a month."

THE KAHN TEST FOR SYPHILIS

"There has become available of late a blood test which is destined to play an important role in public health by making possible a greater control of syphilis than has heretofore been achieved," states Dr. R. L. Kahn, immunologist of the Michigan Department of Health, Lansing, Michigan, referring to the Kahn test for syphilis, which has been devised by himself.

"Perhaps the outstanding feature of the Kahn test is the comparative simplicity", he says. The blood serum of a patient is mixed with a special reagent—antigen—which can readily be prepared. Within thirty seconds to three minutes a precipitate appears in the mixture if the patient has syphilis. No precipitate appears if the patient is free from this disease. The antigen for this test is a stable product and can be shipped anywhere in the world without danger of deterioration. Antigen has been sent from the Michigan laboratories to New Zealand, Syria, Siam, Sweden—in fact, all over the world."

"Obviously, the complexity of the Wassermann test and the use of animals which it requires make its employment impossible except in medical centers where extensive laboratory facilities are available. The result is that the larger part of the world is without a blood test for syphilis. Even in this country, the use of the Wassermann test is impossible in smaller hospitals and in sections removed from medical centers. The Kahn test, however, can be used anywhere—in tropical or in arctic regions, in the field laboratory of the army or aboard ship in the navy—and at a cost decidedly less than that of the Wassermann."

Whereas it takes a day to perform a Wassermann test, it takes less than an hour to perform a Kahn test. "In the laboratories of the Michigan Department of Health, where from two hundred and fifty to three hundred Kahn tests are carried out daily, reports of the results are ready for the physicians a few hours after the blood specimens are received in the laboratory."

Some time ago, Admiral Stitt, Surgeon General of the United States Navy, designated a number of medical officers in different naval stations to study the comparative value of the Wassermann and Kahn tests. "As a result of this study, an official circular from the surgeon general's office dated December 31, 1925, announced the abandonment of the Wassermann test and the employment of the Kahn test as the standard procedure."

"Since the adoption of the Kahn test by the Michigan Depart-

ment of Health on October 15, 1925, as the official method for the serum diagnosis of syphilis over eighty thousand tests have been reported to physicians with excellent results. The health department first reported one hundred and seventy-five thousand Kahn tests parallel with the Wassermann test. This large comparative series proved the Kahn test more reliable than the Wassermann and led the health commissioner, laboratory director, and state council of health to abandon this test in favor of the Kahn test. The use of the Kahn test, however, is not limited to this country; laboratories throughout the world are adopting it, and among others, pathologists in the Philippines, Russia, and China report its satisfactory use."

Another argument offered by Dr. Kahn in support of the convenience of his test is its very low cost as compared with that of the Wassermann test.

HYGIENE IN THE OLD DAYS

Health conditions in the United States in the days before the revolution are described by Anna M. Schaeffer, of Teachers' College, Columbia University in a recent article in *The Nation's Health*. Before 1685 the homes of many American families were very primitive. "They included even caves on the side of a hill, the earth forming two walls while layers of tree limbs covered with sod and bark made the roof."

"In 1626", she says, "all but one of the thirty homes in the island of Manhattan were made of bark." These bark cabins contained one single room, where the whole family lived, ate and slept. This later developed into the two-room type of dwelling, and gradually, with the passing of the years, the two-story log-cabin, with upstairs sleeping quarters, developed.

"Before china or even pewter was commonly used," says Miss Schaeffer, "the serving of meals was not an elaborate affair. Food was piled up in trenchers, more readily described as wooden bowls, and every one helped himself directly from the dish by means of a spoon which often went from mouth to mouth."

She quotes a book of etiquette of that period as giving the following rules of polite conduct:

"Smell not of thy meat, nor put it to thy nose; turn it not to the other side upward to view it from thy platter or trencher. When thou blowest thy nose let thy handkerchief be used. Spit not in the room but in the corner and rub it with thy foot."

Another rule of hygiene, as set forth in the books of that time, was as follows:

"Every day we should take pains to wash our hands and one should also wash one's face *almost* as often."

It was customary at about 1664—states Miss Schaeffer—to pasture swine and cattle on the streets of Manhattan, which at that time abounded in mud and filth.

The practice of medicine was still very primitive in those colonial days as shown by the following:

"A noted master of medicine in London, Dr. Stafford, in a letter to Governor Winthrop of Connecticut writes of the illusory appearances of holes in the leaves of St. John's Wort, and recommended them therefore as good for hallucinations, madness, and assaults of the devil. Milk, being white, cured 'bladder humor,' and when mixed with saffron and a bit of salt could be prescribed as a cure for jaundice, for since jaundice is a yellow disease, only a yellow remedy could be effective. In New York City, apparently, the dosing had more variety, and certainly required greater ingenuity in its performance, such as catching twenty head lice and mixing them with nutmeg, sugar, and a little tumerick."

"In instances of poisoning a black powder was the cure, and as toads were considered poisonous they were used in its compounding. Moss taken from skulls of the dead and applied to a weapon with which a wound had been inflicted, and the weapon in turn laid in the abrasion, would result in a cure. Bedbugs for obstetrical cases, and the flesh of boiled mice for timidity are but a few of the obnoxious and loathesome remedies listed in 'Barrough's Method of Phesecke' and 'Green's Medicine.' In 1676 when Bacon, the Virginia rebel, was obliged to cast his discarded garments directly into the fire, the presence of the lice parasites was thought to be one of the results of his disease, though it was known he had dwelt in Indian wigwams a few weeks before."

A GOOD PLAN TO URGE ANTI-TOXIN IMMUNIZATION

The following news-item is taken from *Health News*, the weekly bulletin of the New York State Department of Health:

"Stickers with the printed recommendation, 'When the Baby is Six Months old have your Doctor give toxin-Antitoxin to Prevent Diphtheria' are now supplied by the State Department of Health to local registrars to be attached to the notices of birth certification sent to parents of newborn babies.

"In this manner the need for protecting young children against diphtheria is brought to the attention of parents at a time when they are particularly receptive to suggestions regarding the preservation of the health of their offspring.

"In the opinion of one health officer this plan is proving of value and, if consistently carried out, will ultimately aid in securing a large number of cures."

QUESTIONNAIRE FOR CHILD-TRAINING HABITS

The following questionnaire is suggested by Sophie Hardy, District Secretary of the Brooklyn Bureau of Charities, for the study of the personality of mothers. An inquiry is made by this means into the habits of the mothers studied, as regards the care of their children, with the hope of getting a better understanding of their educational needs and possibilities. Any mother who could give a "yes" response to each one of these questions would be training her child in an intelligent manner, and the number of "no" responses would give an idea of her lack of preparation for the efficient discharging of her motherly duties:

1. Does the mother send the children to bed at a regular time?
2. Does she see that they get up at a regular time?
3. Does she see that they sleep with windows open?
4. Does she have them sleep with only one or two in a bed?
5. Does she see that the younger children have regular naps?
6. Does she serve meals at regular hours?
7. Does she have the children all seated at table?
8. Does she plan the meals with any knowledge of relative food values?
9. Does she see that the children use tooth brushes at least once a day?
10. Does she see that they have baths at least once a week?
11. Does she consult either a private physician or a clinic doctor in case one of the children is ill?
12. Does she allow the children to enter a hospital when necessary?
13. Does she realize that illness is largely preventable rather than a matter of chance?
14. Does she see the value of habit training in matters of hygiene?
15. Does she have faith in doctors?
16. Does she have faith in hospitals?
17. Does she believe there is any value in learning about balanced diet?
18. Does she see that each child has a place for his clothes and personal belongings?
19. Does she give each child a regular task as part of the household duties?
20. Does she send the children regularly to school?
21. Does she help with their homework or see that they have opportunity to do it?
22. Does she show an interest in their school life?
23. Does she value the school's influence instead of just being glad to get rid of the children by sending them to it a few hours a day?
24. Does she take the children to parks or museums?
25. Does she let them attend moving pictures only once a week?
26. Does she know who the children's playmates are?
27. Does she make them welcome in the home?
28. Does she believe that recreation has an important place in a child's development?
29. Does she send the children regularly to Sunday school or church?