

PUBLIC HEALTH

Good Health of Old Year To Continue Into 1933

But Guess is Hazardous, Says Authority Citing Dependence On Weather, Public Health Services and Research

By **DR. LOUIS I. DUBLIN**, Past president of the American Public Health Association and Third Vice President and Statistician for Metropolitan Life Insurance Company.

THE YEAR 1932 has closed with the best health record in our history. There is no sign of any untoward circumstance which would indicate an early change in the situation. However, it is at best a very hazardous undertaking to say how next year will turn out.

An outbreak of virulent influenza is entirely possible at any time and that might change the entire complexion of the mortality of 1933. Health authorities have expected such an outbreak this year in view of the past history of influenza. It has fortunately not developed. But in some instances these epidemic outbreaks do register after a delay of some months, and that is something to keep in mind for 1933.

The meteorological conditions will also play a very important part in the health picture of next year. These last few years have been extraordinarily favorable in that regard. I have no idea whatever as to what the weather conditions will be in the future.

Much will also depend on the continued efficiency of the Federal, State and municipal health services. If the present tendency to curtail budgets continues or is accelerated, there should be a very decided reflection in the death-rates from certain of the infectious diseases. It would be the worst possible economy for communities to endanger their vital resources through parsimony with health expenditures.

Certain advances in medical science make it very dangerous to predict recurrence of epidemic diseases on the basis of past performance. This is especially true of diphtheria. This disease has been declining very remarkably because of the widespread immunization of children with either toxoid or toxin-antitoxin. The effect of this practice has been completely to modify the cyclical outbreak of the disease.

In the past, diphtheria, like measles, whooping cough and scarlet fever, has recurred in fairly well-defined cycles. The peaks in the death-rate have occurred with much regularity at intervals of about seven years. Measles, whooping cough and diphtheria have had secondary peaks every three or four years. Influenza has shown a peak in the death-rate every three years since 1920, that is, in 1923, 1926 and 1929. Nineteen thirty-two has, however, passed without any serious outbreak. This may have been merely deferred for some months and may occur in 1933. Pneumonia, closely related to influenza, is expected to follow about the same course or cycle as influenza. So far this year the very lowest pneumonia mortality ever recorded has been observed.

The continued drop in tuberculosis mortality in 1932 was particularly striking and the most unexpected of all favorable items in the mortality picture. It can only be explained by the fact that community facilities, including hospitalization and the feeding and shelter of the unemployed have been continued on a very effective basis. If these are continued, there is no reason to expect an increase in tuberculosis deaths, especially since it appears that the forces at work

PSYCHOLOGY

People Learn Faster When Not Punished For Mistakes

IF DAD STARTS to take you to the woodshed for not learning your lessons, just cite to him the lesson taught by psychological tests reported to the American Association for the Advancement of Science by Dr. Milton B. Jensen of Quenemo, Kansas. He found that punishment interferes with the operation of mental powers and is a handicap to scholastic accomplishment.

Dr. Jensen tested eleven men and

eleven women, who were blindfolded, with a device that gave them a painful electric shock every time their fingers took the wrong turn in a maze of tacks. Then he tried the same test on a similar group who were not shocked but politely informed of their mistakes. The persons tested by electricity made 58 per cent. more errors and they required 34 per cent. more trials to learn.

I do not believe that we have reached the peak in the cancer death-rate which will probably continue to rise in 1933. Very large increases in the cancer mortality were recorded in the last two years among industrial policyholders. On the other hand, the cancer death-rates for a group of cities showed a slightly lower rate in 1931 than 1930. It is difficult to understand why there should be this difference in the situation as between wage earners, on the one hand, and the general population, on the other. It will be very interesting to see what the figures for 1932 in the general population show.

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STATISTICS

70-Year Life Expectancy Foreseen For Americans

THE AVERAGE American of the future may confidently expect to live out the Biblical three-score-and-ten years, predicted Drs. Louis I. Dublin and Alfred J. Lotka of the Metropolitan Life Insurance Company in a discussion before the American Association for the Advancement of Science.

Some years ago, when the actual average length of life was about 57 years, Dr. Dublin estimated that ultimately this figure would be 64.75 years. Since then this hypothetical figure has actually been exceeded in New Zealand. Dr. Dublin does not see any reason why Americans may not exceed in due course the figure achieved ten years ago by New Zealanders. *(Next Page)*

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