



NEWS DIGEST

of the NEW YORK HEALTH DEMONSTRATIONS

CONSIDERABLE comment has been aroused recently on both sides of the Atlantic regarding the prolongation of the average span of human life. Provoked, in part, by the dedication of its efforts by the American Public Health Association to the end "that within the next fifty years as much as twenty years may be added to the expectancy of life which now prevails throughout the United States,"* writers have asked—is longer life generally desired? Is it profitable to society that we should live long? According to the *Liverpool Echo*, Bernard Shaw concludes that most people care very little about living longer and adds that they will not bother to readjust their habits to that end.

*From a resolution prepared by the late Hermann M. Biggs, M.D., Haven Emerson, M.D., and Lee K. Frankel, Ph.D., and adopted in October, 1922, by the American Public Health Association. The American Journal of Public Health, December, 1922.

X-RAY inquests on Egyptian mummies, showing that we are suffering today from exactly the same diseases as those which attacked the ancient subjects of the Pharaohs, "certainly make it clear that there is plenty of room for medical progress," observes the *Bath and Wilts Chronicle*.

On the other hand, Sir Ronald Ross, the British scientist, for whom the Ross Institute, English counterpart of the famous Pasteur Institute in Paris, has been named, states that twenty years have been added to the average Britisher's life during the past eighty years. He is inclined to believe that the average age at death may be extended during the next century to 150 years. On the occasion of his seventy-fifth birthday, Dr. William H. Welch, Dean of the School of Hygiene of Johns Hopkins University and Chairman of the Milbank Memorial Fund's Advisory Council, was quoted in

the *Quebec Chronicle* and elsewhere as holding out the assurance that modern medical science is placing longer life within reach of man.

IN the June issue of *Harper's Magazine*, Edward S. Martin makes an inventory of gains to come to mankind by the successful completion of a campaign to raise the level of general health and human vitality, and by the consequent lengthening of the life span. Taking the Bellevue-Yorkville Health Demonstration in the City of New York as a case in point, Mr. Martin asks who is going to take care of old people whose lives have been prolonged as a result of any such intensive community application of modern health knowledge?

"Suppose the Milbank Fund produces a much increased proportion of old people in that strip that is to be benefited by its attention; who is going to take care of them?" asks Mr. Martin.

"Grandparents may not do as well in flats as they used to do in farm houses. They mean more rent, more food. Are they going to be worth it, and is it going to be possible to provide it for them except at the public expense?"

"Some of these questions seem rather ominous. The answer we get to them all is that increased longevity is simply an incident of better health in a community, and that better health, of course, is profitable. That is, the same process which provides for an increased number of old people provides also for increased competence in them while they are growing old, increased ability to earn and provide for old age, and increased ability in their children, if they have them, to provide for them. So there is not really anything terrifying in the idea of longer life. One cannot say that it is not economic. If life is good at all it is worth living through to a natural end. If old age is a penalty of health, it is one worth paying."

"It is everybody's duty to live his life through in so far as he can . . . Guard life then and cherish it, for it is precious while it lasts, and so is health."

—EDWARD S. MARTIN, *Harper's Magazine*, June 1925