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THE substitution of highly refined food products for natural foodstuffs was one important development of the modern industrial era which brought an ever increasing number of the population into cities. Storage and distribution of foods required its preservation for long periods and this resulted in many modifications in the modern diet. The science of nutrition now has established the fact that nutrients essential to human nutrition have been removed from the refined foods to which the public taste has become educated. The question of restoring these essential elements to foods becomes important, therefore, and was discussed by a group of experts at a symposium on Fortification of Foods at the recent annual meeting of the Institute of Nutrition. The five papers read at this symposium include: "Basic Nutrition Principles Involved in the Fortification of Foods," by Dr. Agnes Fay Morgan of the University of California; "Fortification of Foods in a General Program for Better Nutrition," by Dr. Lydia J. Roberts of the University of Chicago; "Public Health Aspects of Fortification of Foods," by Dr. W. H. Sebrell of the United States Public Health Service; "Governmental Control Problems in the Fortification of Foods," by Dr. E. M. Nelson of the United States Department of Agriculture, and "Viewpoints of the Food Industries Regarding Fortification," by Alonzo E. Taylor, Director Emeritus of the Food Research Institute of Stanford University.



Familial incidence of diseases has long been of interest and has an important bearing on our understanding of the epidemiology of a disease. A higher frequency of any disease among related groups is of significance in the application of preventive measures, whether that incidence arises from infection as a result of familial contact or is due to inherited pre-

disposition to the disease. The study "Further Observations on the Occurrence of Rheumatic Manifestations in the Families of Rheumatic Patients" by Ross L. Gauld, Antonio Ciocco, and Frances E. M. Read is a significant contribution to the epidemiology of rheumatic disease.



One of the significant contributions of epidemiological research in tuberculosis has been to demonstrate that the risk of disease and death is highly concentrated within an exposed group, those in familial contact with the disease. A natural corollary to this finding is further investigation as to the full effect of tuberculosis upon the growth of the family unit. Such an investigation is reported upon by Miss Jean Downes of the Fund's staff in the article "The Effect of Tuberculosis upon the Size of Family." The broad indications of the study are that, due to a lower fertility among the tuberculous operating in conjunction with an excessively high mortality among their offspring, the tuberculous family tends to be eliminated much more rapidly than do families drawn from the general population. This has probably been a factor contributing to the decline in the tuberculosis death rate which has been occurring over a long period of years and in the future the size of the family unit among the tuberculous will play an increasingly important part in the decline in mortality from the disease.



Past studies of variations in fertility according to occupational class have been largely restricted to married women classified by the husband's occupation. This procedure operates toward holding constant the factor of group differences in proportions married. In "Differential Reproduction in England" Dr. Christopher Tietze presents birth rates by occupational class when the full influence of variations in marriage frequencies is retained. His technique is that of relating births to males instead of females, the advantage being that unmarried and married males can with equal readiness be divided into occupational groups. The findings from the English material emphasize the need for learning more about the bearing of marriage frequencies on class differences in reproduction in this country. An analysis directed toward this end is now being made

under the joint auspices of the United States Public Health Service and the Milbank Memorial Fund. Dr. Tietze's paper also contains some figures on differences in infant mortality rates according to occupational status of the father.



To the extent that increased practice of family limitation has played a part, the general decline in fertility rates signifies progressively fewer involuntary births. In view of the lack of similarity in rates of decline in fertility in the various age groups, Dr. Henry S. Shryock, Jr. has posed for examination the hypothesis that a relatively fixed "level or plateau" in fertility rates will be apparent in some age groups earlier than in others. Under the title "Trends in Age-Specific Fertility Rates," he presents a critical analysis of this hypothesis, using several series of historical data for different countries of the Western World. The data are set up to show average annual rates of change in age-specific birth rates during stated periods since the World War. Particular attention is devoted to trends during the most recent period, that of partial economic recovery beginning in 1934.