

lation” the author shows that we need and desire “better people” but that the definition of “better” is practically impossible and in general rests on emotional grounds.

The book urges positive control of population growth to prevent overpopulation, and ends with the idea: “It would seem to need no argument to show that the modern, the scientific, the human way is to fix upon some standards of social well-being, to discover a formula of population growth conducive to those standards, and then to regulate the actual reproduction of the community accordingly.” Since the author does not favor the control of human reproduction by a super-eugenicist, it becomes clear that such a plan could only be carried out on a democratic basis, that is, by individual action; and in this connection he adds: “Reflections such as these may help the intelligent individual, or married couple, to chart out a socially acceptable line of personal behavior in the matter of reproduction. Only the genuinely intelligent person, in the present state of scientific knowledge and social conventions, can possibly chart a sound program, and only a person with highly developed self-control and firmness can carry it out. Only one with a sensitive social conscience will even want to chart such a course or try to carry it out.” To the extent to which the book transforms its readers to members of this class, it will be a success.

LOWELL J. REED



NEW YORK STATE PROGRAM FOR CANCER CONTROL

IN MAKING cancer and other malignant tumors reportable diseases, New York State has taken a step forward. According to Dr. Edward S. Godfrey, Commissioner of Health of the State of New York,¹ reporting should in the course of time make available to the medical profession accurate information instead of uncertain estimates on:

1. The true magnitude of the cancer problem.
2. The relative incidence of cancer in the various sections of the State and among various social and economic groups.

¹ Godfrey, Edward S.: New York State Program for Cancer Control. *New York State Journal of Medicine*, December 15, 1939, No. 24, pp. 2280-2283.

3. The relation between cancer and such factors as occupation.
4. The extent of the alleged increase in cancer above that due to the aging of the population.
5. The accuracy of mortality statistics.
6. The true incidence of the various forms of cancer.

Undoubtedly reporting of cancer should contribute to a more accurate conception concerning the prevalence of the disease. Prevalence is intimately related to the incidence and fatality of the disease and such information is necessary for wise and adequate planning of facilities for care and treatment of cancer patients.

The expanded program for control of cancer in New York State is to include: the establishment of tumor clinics at strategic points throughout the State, cancer institutes to be held in various cities through the cooperation of the state and county medical societies, and studies of the economic aspect of the cancer problem.

Among 8,000 cancer patients admitted to various hospitals and clinics in the State, there was during a four- to five-year period a case-fatality of 82 per cent. Assuming that the case-fatality in this group holds true for the general cancer population, on the basis of results achieved with patients adequately treated at an early stage of the disease, Dr. Godfrey has estimated that the fatality of the disease could be reduced to 60 per cent which would mean in up-state New York a saving of 2,300 lives each year. On this basis for the entire nation there would be a saving of 38,000 lives annually.

In a discussion of the unfavorable side of the mortality record for 1939 among the Industrial Policyholders of the Metropolitan Life Insurance Company, the following comments concerning cancer are pertinent:

All in all, the record for cancer gives little comfort. The achievement in this field is in sharp contrast with what has been accomplished with diseases like typhoid fever, the communicable diseases of childhood, tuberculosis, diarrheal diseases of infancy, and conditions arising out of pregnancy and childbirth. No substantial progress has been made in the control of this condition, and today, in the United States, it is the recorded cause of one out of every nine deaths. No marked improvement

will be noted, we believe, until provision is made for the discovery of cases early and for their skilled care.²

Cancer is indeed one of the most fatal diseases; it now ranks third among the leading causes of death. Cancer also carries with it the burden of invalidism. The problem of its control challenges the best efforts of physicians and public health officials.

JEAN DOWNES



ACCEPTED FOODS AND THEIR NUTRITIONAL SIGNIFICANCE¹

IN ALMOST every issue of *The Journal of the American Medical Association* appear reports of the action of the Council on Foods on food products whether acceptance, rejection, or rescindment of previous acceptance. It is not to be expected that the reader will retain in his memory this unending, running record.

The book, *ACCEPTED FOODS AND THEIR NUTRITIONAL SIGNIFICANCE*, retraces the positive side of the record. Here, some 3,800 brands of food products, accepted as of September 1, 1939, are brought together, classified, and indexed for ready reference. One useful feature is that the nutritional significance of the various types of foods is comprehensively discussed. We suspect that physicians and many health workers, particularly nurses, are being asked more and more about the value of particular foods; those not altogether fluently conversant in this specialty, but who desire a reading knowledge of it, would find comfort in this book.

But there are twenty-nine pages which alone constitute the outstanding section of the work. They should be read not only by every physician but by every literate layman. These pages relate the history of the Council, and describe its purpose, policy, methods, and scope: how with very limited powers it acts on a voluntary basis as a regulatory body to protect the public; how it carries authority and exerts influence by force of its prestige and the merit of its mission; and how its self-appointed task is to

² New Low Record For Mortality in 1939. *Statistical Bulletin*, Metropolitan Life Insurance Company, January, 1940, 21, No. 1.

¹ *ACCEPTED FOODS AND THEIR NUTRITIONAL SIGNIFICANCE*, by Council on Foods of the American Medical Association. Chicago, American Medical Association, 1939, 492 pp. \$2.00.