



IN THIS ISSUE

THE Annual Conference of the Milbank Memorial Fund, held at the New York Academy of Medicine, November 19-20, 1947, included a round-table discussion on "Backgrounds of Social Medicine." The term social medicine, which is now heard so frequently, expresses a broad concept of the inter-relationship of health and disease and man's total environment, *e.g.*, the conditions and situations under which he lives, works, recreates, and finds self-expression. Policy and practice in social medicine are the application of procedures and techniques for adjusting man to environment or of controlling and modifying environment to protect and serve the health needs of man. Basic to the development of methods is knowledge of the effects, good and bad, of various aspects of environment on health. At the Round Table on "Backgrounds of Social Medicine," the present status of evidence on the association of various factors in environment with major causes of ill health was reviewed and considered with special reference to types of investigations needed to improve our knowledge of such associations.

Reports read at the round table are being published in this and later issues of the *Quarterly*. In the current issue, the historical aspects of the study of disease in relation to environment and of the development of the concept of social medicine are reviewed by Dr. George Rosen in the article entitled "Approaches to a Concept of Social Medicine." Ideas of medicine as a social science began to take form about a century ago, and the lines of development in Germany, England, and the United States are traced by Dr. Rosen.

Conditions associated with occupation make up a significant part of the physical environment of the employed

members of the population. Data relating to health of various occupation groups is presented by Dr. Ruth R. Puffer in a paper on "Industrial and Occupational Environment and Health." Problems of specific occupational diseases have been studied intensively in the United States and have received much attention. This report is concerned with the general health problems of industrial workers and with the need to improve our data on morbidity and mortality statistics for various occupational groups for the purpose of developing broader and better health programs in industry.

In the article "The Place of Nutrition in the Relationship Between Environment and Health," Dr. H. D. Kruse points out that nutrition as a bodily process occupies a key position in the association. He brings forth existing evidence from human studies of the effect of environmental conditions on nutrition and its influence in turn on them or on man's reaction to them. In order to visualize these relationships it is necessary to recognize the nature of nutritional abnormalities and their etiology. Besides reiterating his previously enunciated view on the nature of deficiency states, Dr. Kruse presents a new concept of their etiology which includes and integrates all environmental conditions in their effect on nutrition. From these relationships emerges a reciprocity of Nature as exemplified by the effect of physical growth, pregnancy, and disease on nutrition and vice versa.

Intimations that nutrition makes its imprint upon other facets of life and well-being, for example, congenital deformities, physical performance, aging, and longevity, provide promising subjects for test on man in the future. In these studies the new concepts of the nature of malnutrition and its causal complex may be useful guides. Furthermore, they offer a fresh approach in the exploration of chronic disease. Withal, nutrition is seen to be a tangible, material, and crucial medium between environment and health.



In recent years, the leaders in public health and medicine have become concerned over the wide disparity between the medical and health services and facilities available to urban

populations and to village and farm populations in the United States. To a considerable degree, this situation has existed for a long time, if not always, but it is made more acute as the practice of modern medicine and of modern public health requires a variety of trained specialists, hospitals, and much expensive equipment. Other countries, too, have recognized and are trying to solve the special problems involved in bringing adequate health services to rural groups. In the article "Rural Health Programs in Different Nations," published in the following pages, Dr. Milton I. Roemer, of the United States Public Health Service, discusses various aspects of the rural health problem and describes the methods used by many different countries to make personnel and facilities available and to provide the funds needed to pay for them.



The association of certain chronic diseases in the same person has in the past been studied in various ways. In the paper "A Statistical Study of Cancer Among Diabetics," Paul H. Jacobson appraises the results of studies of the association of these diseases in populations composed of dead persons and presents an analysis of their association among the living. Data for adult white persons from a recent morbidity survey indicated that cancer was more prevalent than expected among diabetics, and apparently the incidence of cancer was higher among diabetics than among non-diabetics. The findings from studies such as this are of more than academic interest. They indicate the need for further study of the association of chronic conditions.