



IN THIS ISSUE

IN the current issue of the *Quarterly*, three papers are published which were read at the Round Table on "Backgrounds of Social Medicine," one of the sections of the Annual Conference of the Milbank Memorial Fund, held November 19-20, 1947. Four other papers were published in the January and April issues of the *Quarterly*. The articles in this issue are concerned with variations in mortality and morbidity rates among persons of differing environments, especially social and economic environment.

In the article on "Mortality and Socio-Environmental Factors" by Dorothy G. Wiehl, age and sex differences in mortality in various geographic areas of the United States are discussed, together with some of the broad implications of the current variations. Although death rates in all parts of the United States have declined sharply in the past half century, this decline has not been at a uniform rate. The decrease in death rates for children in rural areas has been less than that in cities, and the decrease in mortality of adult males has been less than that of females both in cities and rural areas. The wide differentials in mortality among various adult populations strongly suggest the importance of environmental factors, but the specific factors have not been identified.

The article "Social and Environmental Factors in Illness" by Jean Downes presents a review of some of the most recent data, drawn from various sources, which illustrate the breadth or the limits of our knowledge of the relationship of illness to various social and environmental conditions. Illness is considered in relation to the following factors: rural-urban migration, age, color, income, crowding, and chronic disease.

The third article in this series is "Physical Impairments and

Socio-Environmental Factors” by Rollo H. Britten. Data from surveys and from health examinations are reviewed by Mr. Britten. The relative prevalence of impairments, such as defects of vision and hearing, dental, and orthopedic defects, in populations of different socio-economic levels is considered. The prevalence of physical handicaps is consistently higher in the lowest economic groups. Physical disabilities are causes of low income, and the components of low economic status are causes of physical impairments, forming a vicious circle.



The relation of long hours of work, particularly of a tedious and fatiguing character, to the health and efficiency of workers has been under investigation for many years. The article “Sickness Among Industrial Employees in Baltimore in Relation to Weekly Hours of Work” by Selwyn D. Collins is a unique contribution in this field of study. His analysis considers persons living in a certain area regardless of the place of work, and compares sickness rates for those working long hours with those working short hours. The period considered was January 1, 1941 to May, 1943.

Long-hour workers of each sex suffered more illness than did short-hour workers. This general picture was true for workers in both defense and nondefense plants. Minor respiratory attacks were consistently more frequent in the long than in the short-hour groups.



Cancer strikes so many persons in the population today that the question “What can we do about cancer?” is being asked by the lay public as well as by the health and medical profession. In an article entitled “Public Health Aspects of Cancer Control,” Savel Zimand, Director of Health Education of the New York City Cancer Committee, describes the measures which can and should be taken now in health campaigns against cancer. This disease is not preventable but early diagnosis and competent treatment can achieve significant results in preventing deaths.