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C. Northrop noted the influence of philosophic ideologies on the social practices of particular cultures. He suggested a world philosophy reconciling the diverse ideologies of various areas as a means to international peace and to adequate selfexpression by persons of diverse potentialities and values. Along this line, Dr. Iago Galdston stated that "modern dynamic psychiatry traces much of the prevailing psychopathy to the conflict between the primitive drives and singular goals of the individual and the restrictions and exactions imposed upon him by the group in which he dwells."

Specific consideration was then given to problems of adjustment in various life situations. Mary Fisher Langmuir stressed the influence of infancy and early childhood on later mental health. She noted the importance of competent parents who recognize the changing needs during the early years of life, such as the desirability of early mothering followed by later independence. In a paper on adolescence, Dr. Phyllis Greenacre suggested "social awareness of the needs of adolescence—its susceptibility to new ideals and particularly its need for social group activities." In a discussion of the family, Dr. William Line noted the relationships between family and community adjustments of individuals.

The purpose of this book, as stated by Dr. George Baehr, was "not so much to reveal new knowledge as to take a first step toward the correlation of available information." This purpose was realized.

ELIZABETH H. JACKSON

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AGE AND WASTAGE IN INDUSTRIAL POPULATIONS¹

In order to study the relation between age and the incidence of specific disease, Padley made use of data on illness for the insured working population of Scotland during the period 1931–1936 and for various insured working groups at particular periods during the past century.

¹ Padley, Richard: Studies on Age and Wastage in Industrial Populations. British Journal of Social Medicine, October, 1947, 1, No. 4, pp. 213-237. In the absence of precise knowledge of illness in the population at risk, Padley measured the frequency of illness by counting cases which received a health insurance benefit. He has expressed illness by cause as proportional morbidity.

The data which Padley presented on previous insured populations were unique in that they afforded sickness experience at intervals during a period of 100 years. The sources included: East India Company laborers for the years 1823-1833; Registered Friendly Societies, 1876-1880; Manchester Unity of Oddfellows, 1893-1897; Leipzig Local Sick Fund, 1887-1905 (compulsory members); National Health Insurance, 1921-1923; and Scottish National Health Insurance, 1930-1931, 1936-1937. Padley found that "When due regard is paid to the necessary crudity of the earlier data, and to inaccuracies due to lumping age groups together in the interests of comparability, it is remarkable how uniform these overall relative incidences are" (for specific age groups). "It is at least apparent that, irrespective of the level of incidence, the relative liability to sickness in the working age range is greatest at under twenty and over sixty and at a minimum probably about the age of thirty."

The Scottish National Health Insurance (1931–1936) data included disabling illnesses reported by the insurance doctor and described by him as to diagnosis, dates of onset and termination, and outcome of the illness. In addition, the record included age, sex, occupation, and (for women only) marital status of the sick person.

From analysis of these data it was evident that the contributions of certain diseases to the total morbidity differed with age. For example, appendicitis contributed 2.3 per cent of the total illnesses for males at ages 20–24 and only 0.4 per cent at ages 55–59. Tonsillitis and skin conditions also affected the younger ages more than the older ages. In comparison, certain illnesses showed a rise in contribution to total illness with increasing age. Myocarditis rose from 0.1 per cent of all illness among persons under 20 to 2.1 per cent for persons 60 years of age and over. The proportion of total illness represented by bronchitis rose from 4.9 per cent for persons under

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20 years of age to 11.7 per cent for persons 60 years and over. Influenza maintained a fairly constant rate of incidence throughout all age groups.

It was found that men and women differed in their liability to accidents or injury. According to Padley, "while injury is far more important as an overall source of wastage among men, its contribution falls slightly with age; with women, however, it increases steadily." An examination of the frequency of accidents by type at specific ages among women showed that for only one type, fractures, was there a striking change with age. After age 45 the relative incidence of fractures increased from 11 per cent to 23.7 per cent at 60 years and over. No such increase was evident among males. Padley suggested that the explanation may be "increased relative liability to fracture among women over the age of 45 . . . may be local, and lie in increased risk among the older women due to selection of the types of occupation in which they find themselves, or it may be a generalized physiological sex difference."

Padley studied certain specific diseases in order to determine the relation of their incidence to age. Infectious diseases made up the bulk of illnesses which showed a decreasing incidence as age increased. Diseases of the cardiovascular system contributed largely to those which increased at the older ages.

This study is of interest because it has made available a large body of data on illness. The information which it disclosed concerning the relation of incidence of specific illnesses to age has important implications. As Padley said, "In a society the age structure of whose population is shifting, such data must form the basis for budgeting specialist clinic services in a system of state medicine. In conjunction with similar figures showing time lost—temporarily or otherwise—from work, data of this sort also give a clear indication of priorities in research and preventive medicine aimed at diminishing man-power wastage."

Doris J. Clark