

AMERICAN CHESTNUT NOW NEAR EXTERMINATION

The problem of quickly using up in the next few years the chestnut trees growing on the 33,000,000 acres of south Appalachian woods is confronting the U. S. Forest Service and the forestry departments of the various states today. Dr. G. F. Gravat and R. P. Marshall, forest pathologists of the U. S. Department of Agriculture estimate that 80 per cent. of all the chestnut trees in more than half of the south Appalachian region will be blighted by 1930. By 1935 it is believed that nine-tenths of forest area will have passed that stage.

Because the lumber shortage is already being felt in the United States, owners of chestnut trees are urged by ^{the} department to utilize their timber before the rotting that follows the blight has caused heavy losses. Tests made by the U. S. Forest Products Laboratory have shown that the blight alone does not impair the strength or durability of the wood. But like a tree ringed with an axe, a blight-killed chestnut when left standing is soon rotted by the wood-decaying fungi that gain a foot hold in the dead tree.

The survey of the blighted area which was begun in 1924 and is still going on has shown that the fatal infection has now reached the southern limit of the commercial chestnut area. No practical control is known.

The organism that is killing the American chestnut by the wholesale, is a foreign fungus that was brought into this country on contaminated nursery stock from Asia a few years ago. In its native home the fungus was not as deadly as in America for the trees had acquired a sort of immunity. Many foreign varieties of chestnut are being imported now with the hope of finding a blight-resisting kind to replace the ones destroyed. While none have yet been found that are wholly immune a hairy Chinese variety and a Japanese chestnut have shown some natural resistance.

The American chestnut supplies half of the tanning extract used in this country in the manufacture of leather, and with the species facing extermination, a new economic problem must be met, it is stated.

MUSSOLINI HAS HYPOBULIA SAYS PSYCHIATRIST

The mind of Italy's dictator, Mussolini, was measured by psychiatric standards at the meeting of the American Psychiatric Association and was summed up in one word -- hypobulic. The mental analysis of Mussolini was made by Dr. Edward E. Mayer, well known psychiatrist of Pittsburgh, and was used in illustrating his remarks on hysteria.

Mussolini is not acting by reasoning will power, but by hypobulic will, he said. This type of will was defined as a blind sort of will that is not prevailed upon by persuasion or logical arguments.

"This hypobulic will exists in well persons as an essential and primary constituent of the will, linked with the purposive will to make the normal will," said Dr. Mayer.

In hysteric individuals, he explained, the two wills become separate and antagonistic factors in the personality. The hypobulic will attaches itself to an easily excitable group of ideas and is continually being brought by them into the foreground. When this false contact is loosened, the two types of will unite again, and the hysteria is cured.

Hysteria was described by Dr. Mayer as a turning away from actualities. The rational mind, finding some situations in life unsatisfactory, shifts the burden of its inefficiency to lower mental mechanisms.

"Mussolini is hypobulic," he said, "because he is playing like a hysteric with low-threshold stimuli to which he responds with all his being rather than to reasoning motivated conduct.

"Hypobulia exists as the predominant attribute of a strong personality, for it is not a weak-will at any time. The fanatical prohibitionist is an example of a hypobulic personality."

TOO MUCH INTELLIGENCE TESTING, SAYS CHILD EXPERT

"There is too much of a tendency to reduce human intelligence, human behavior, and human beings in general to mathematical quotients," declared Dr. H. W. Potter, who addressed the recent meeting of the American Psychiatric Association.

Dr. Potter deplored the tendency to brand troublesome individuals as mentally deficient merely because they grade low on formally administered mental tests.

"Such diagnosis may easily result in gross injustice and real harm," he said.

Apparent mental deficiency or backwardness may be due to many causes other than lack of intelligence, he pointed out:

"It is not uncommon to find a child more or less retarded in school who is reacting with some anti-social behavior because of emotional or temperamental instability, certain home situations that seem to perplex and worry him, troubles between his parents, or illness. He may have a glandular disorder which could seriously affect his mental condition. Mental retardation may come as an aftermath to sleeping sickness.

"It is absolutely necessary to probe into all of these factors, before the diagnosis of mental defect can be made with certainty. Once such difficulties are cleared up, the backward child may be found to be endowed with normal intelligence, indeed, possibly superior intelligence."

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