America's shameful record on the streets and highways in 1935 is both worse and better than in 1934. Traffic deaths reached an all time peak at 36,100; an increase of one per cent over the previous year. That is the bad side.

But on the good side of the traffic death ledger is the fact that gains in motor car registrations and gasoline consumption should have increased the deaths from 5 to 6 per cent.

## Hope for Future

Something altered the increasing trend and slowed it up for the first time in some years. The curve denoting deaths by years has risen each time but appears to be flattening off. Sometime soon it may reach its peak and start downward.

Out of the whole complicated picture certain efforts stand out as giving help in remedying existing traffic conditions. Without attempting to put them in order of importance they might well be the following:

1. Curb the driver who travels above the speed limit but set the limits reasonably; 10 miles an hour where needed but with high speeds where possible with safety. 2. Build "smart roads for the dumb drivers" who at present do high speed driving on low speed roads.

3. Through education train the younger generation to the realization of traffic hazards.

4. Strive for more uniformity of requirements for driver licenses, making physical examination and a real test of driving ability essential parts.

## Improve Design

5. Let motor car manufacturers so design their cars that they will stay in factory-delivered condition longer than they do; and make periodic inspection of motor cars mandatory to solve the problem of the careless delinquent driver who is taking a moving menace over the roads at high speed.

6. Strive for uniformity in traffic signals and regulations. Have them reasonable but enforce them consistently.

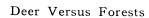
7. Attempt the solution of the parking problem with its resulting aid to decreasing congestion.

8. Use the propaganda of fear where necessary but remember that it will only work over fairly short periods of time and is not a permanent solution.

Science News Letter, June 20, 1936



GAME MANAGEMENT



DEER and the woods are so commonly thought of as inseparable that it will come as a shock to many to learn that they can be enemies. And it will be a second shock, to hear that the profession of forestry in Germany, usually held up to the world as an almost inerrant model, can make mistakes, and has made some very serious ones in the past.

Yet such is the case. Right now, as a result of mistakes in past German policies of forestry and game management, there are too many deer in the forests of Germany, and the problem of getting them back into balance with their food supply is giving German foresters and game management people

many brow-wrinkling hours.

The ups and downs of deer and forest, the flow and ebb of forestry fads in Mitteleuropa (for there have been fads even in German forestry) are given a thoughtful exposition by Aldo Leopold of the University of Wisconsin (Journal of Forestry, April). Mr. Leopold spent several months in the forest regions of Germany and Czechoslovakia, investigating conditions and methods there.

The present deer-forest unbalance in Germany, Mr. Leopold indicates, is due in part to the "spruce fad" of the late nineteenth century. It was found that larger cuttings of wood could be made from pure stands of spruce trees, grown close together, than from any other type of forest. So this highly artificial type of tree-cultivation swept the country, and held sway until about the time of the World War.

But in such a forest there is nothing for deer to eat. Spruce needles themselves are inedible, and the crowded

MEDICINE

## Find New Dangers in Chronic Carbon Monoxide Poisoning

NEW danger from insidious carbon monoxide poisoning, previously unrecognized by physicians generally, was reported by Dr. Harvey Beck of Baltimore at the meeting of the American Therapeutic Society in Kansas City, Mo.

The hitherto overlooked disease is slow carbon monoxide asphyxiation. Acute carbon monoxide poisoning has been much discussed, but the chronic form has been neglected, Dr. Beck said. He thinks physicians have confused the chronic form with other diseases which it resembles in some of its symptoms. He reported ninety-seven cases of this condition. The patients had been repeatedly exposed to carbon monoxide, in doses too small to kill them outright, at varying intervals over prolonged periods.

The patients complained chiefly of headache, but also of dizziness, nervousness, nerve and muscle pains, shortness of breath, digestive disturbances and palpitation. Weakness, restlessness, a

depressed feeling were other symptoms. Some of the patients were confused and had difficulty in talking. Two had symptoms of stomach ulcer and two suffered from typical angina pectoris. These symptoms of serious heart and stomach disorders cleared up promptly when the patients were removed from exposure to carbon monoxide which in these cases came from defective gas heaters.

In all cases of this disease the cause of it, exposure to small amounts of carbon monoxide, must be removed before the patients can be restored.

Solution of the problem lies in proper preventive measures, Dr. Beck said. Carbon monoxide is a colorless, tasteless, odorless gas which gives no warning of its presence. It kills by combining with the hemoglobin of the blood, thus depriving the body tissues of their normal supply of oxygen. Air containing as much as one-tenth per cent of this gas is dangerous to life.

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