

reduced the deaths from influenza and pneumonia by more than 15% in the year. Tuberculosis, which is an excellent index of the current health of the population, has recorded a minimum rate virtually every month this year.

Even the diseases of the heart, coronary arteries and kidneys, which we have come to expect to show increases corresponding to the aging of the population, recorded rates little above those of last year. Cancer and diabetes, two other important causes of death in middle and later life, showed higher rates than in 1941. For cancer, the rate was a new high; for diabetes, the increase was 3.0% but the rate is still below that of 1940.

**No Serious Epidemic**

We may then say that the health of the people remained excellent in 1942. There was no serious epidemic and the prevalence of the communicable diseases remained low. Likewise, there was no serious outbreak of meningitis such as occurred in the camps in World War I and which it was feared might recur. The chronic degenerative diseases, although some of them showed slightly higher rates than in 1941, were, with the exception of cancer and diseases of the coronary arteries, more favorable than in the years immediately preceding. Altogether, the first year of our participation in World War II has left us virtually unscathed so far as the nation's health is concerned, a very different situation from that among the other belligerents.

But despite this excellent showing in 1942, the outlook for 1943 is still very uncertain. On the favorable side, there is an assurance that the advances in medical science and practice have made it possible for us to control the acute conditions. On the unfavorable side,

there are several items of great potential danger. There is first and foremost the unpredictable number of war casualties. Certainly, there is every reason to expect that such casualties in 1943 will be far greater than they were in the past year. Secondly, there is the danger inherent in the crowded living conditions and the temporary makeshift homes in which many workers are compelled to live near the defense plants. There is also the problem of maintaining adequate heating in the buildings in the areas where the shortage of oil is most acute. It is to be hoped that the relatively unfavorable death rates recorded in the closing weeks of the year do not reflect a permanent rise resulting from these factors. In addition, there are also signs that a scarcity of physicians may develop in some localities. The absorption of hospital staffs in the Army and in the war industries has created a serious problem for many communities and their health institutions. These items may well cause us trouble if an outbreak of serious respiratory disease occurs.

**Blackout a Hazard**

The blackout in coastal areas to prevent the sky glow dangerous to coastwise shipping also contributes a new accident hazard. It was found in England that the blackout there contributed to a marked increase in the number of road accidents. Nevertheless auto travel restrictions should continue to reduce the number of motor vehicle accidents in spite of the poor illumination on streets and highways. Strict observation of traffic rules by pedestrians will help to minimize the danger.

But in spite of all of the uncertainties and difficulties, we can face the year 1943 with the knowledge that we have many resources available to counterbalance the special hazards. Apart from the

dangers inherent in the war, there is no untoward circumstance as to the public health. We have an abundance of natural resources, an excellent medical profession and skilled health agencies which, working together with an informed public, should see us through.

*Science News Letter, January 9, 1943*

PSYCHIATRY

**Promotion Depression Is Another Manpower Hazard**

► LATEST MANPOWER hazard to be described by medical men is the Promotion Depression, or depression due to being promoted.

While most of us would be willing to risk a little depression in this cause, some people go all to pieces when faced with a raise and sudden increase in responsibility, according to Dr. Norris B. Flanagan, of Boston, reporting three recent cases in the *Journal of the American Medical Association* (Dec. 26).

Three reliable, overconscientious employees, who were suddenly shifted by war conditions to positions of increased responsibility, reacted with severe depression, reports Dr. Flanagan. Symptoms included suicidal ideas, loss of sleep and appetite, and impotence. One patient, after six weeks in a hospital, was able to adjust to a routine job, but unable to accept his promotion.

People subject to promotion depressions can be recognized by industrial doctors and personnel officers, says Dr. Flanagan, since they are generally overconscientious, reliable workers because of their fastidious, or even fussy attention to detail.

But by definition, a "boss" must be one who can delegate his work and not feel compelled to do it all himself, explains Dr. Flanagan.

*Science News Letter, January 9, 1943*

