

PSYCHIATRY

Returning Soldier Problem

The man who has adjusted well to military life will have more trouble than the NP in fitting back into civilian life, psychiatrist says.

➤ **HELPING** the returned soldier to fit back into his place in civilian life requires a teaming up of physicians with statesmen, sociologists, psychologists, industrialists and, in fact, society as a whole. Everyone must cooperate to make the effort a success, Dr. William Malamud, director of clinical psychiatry at Worcester State Hospital, told a meeting of the American Academy of Arts and Sciences in Boston.

Dr. Malamud is working with the research staff at Worcester in an investigation of the reconditioning and civilian readjustment of men who are psychiatric military casualties.

But it is not the NP casualty, the man

whose mind or whose nerves have been upset by military service, who is going to have the greatest difficulty in fitting back into the life of his community when he leaves the Army, Dr. Malamud told the meeting. Such casualties often occur in men who were not able to make the adjustment satisfactorily to military life. If they can be cured of their illness, and most of them can be cured readily, they should not have much difficulty in fitting back into the old pattern of civilian life.

"It is the soldier who has made a particularly good adjustment to military life," Dr. Malamud declared, "who will have the difficulty in readjusting himself to the community to which he returns."

Study of the NP's, however, and the reasons for their difficulty in adjusting to military life, as well as study of those who have nervous difficulties when they get home, may throw light on the problems faced by the well-adjusted soldier who must make a new readjustment after his separation from the service.

One veteran who came to Dr. Malamud's clinic had seen three years' overseas service in the Pacific. He needed help because on his civilian job he suffered marked restlessness, inability to concentrate on his work, jumpiness, vague pains, loss of weight and appetite and generally irritable and resentful attitude towards both employers and co-workers.

He had gone back to his old job, hoping to do the same kind of work he had done before he went into the Army at 18. But now he was 22 and still shaky from long hospitalization. Having lost about four years of work, he found that others who had stayed on the job were advanced to higher job levels. One of the boys he had started out with, and who had been rejected for service because of a physical defect, was now foreman.

The veteran was particularly resentful of this foreman, and any little criticism from him produced outbursts of anger and irritability and made the chest pains worse.

The solution was in a thorough physical examination which showed that the many physical symptoms were caused by emotional difficulties, and in transfer to another factory where the possibility for further education and training for a better job with new associates was assured. In the new job he was able to take advantage of what he had learned in his years of service and turn them into an asset rather than a loss.

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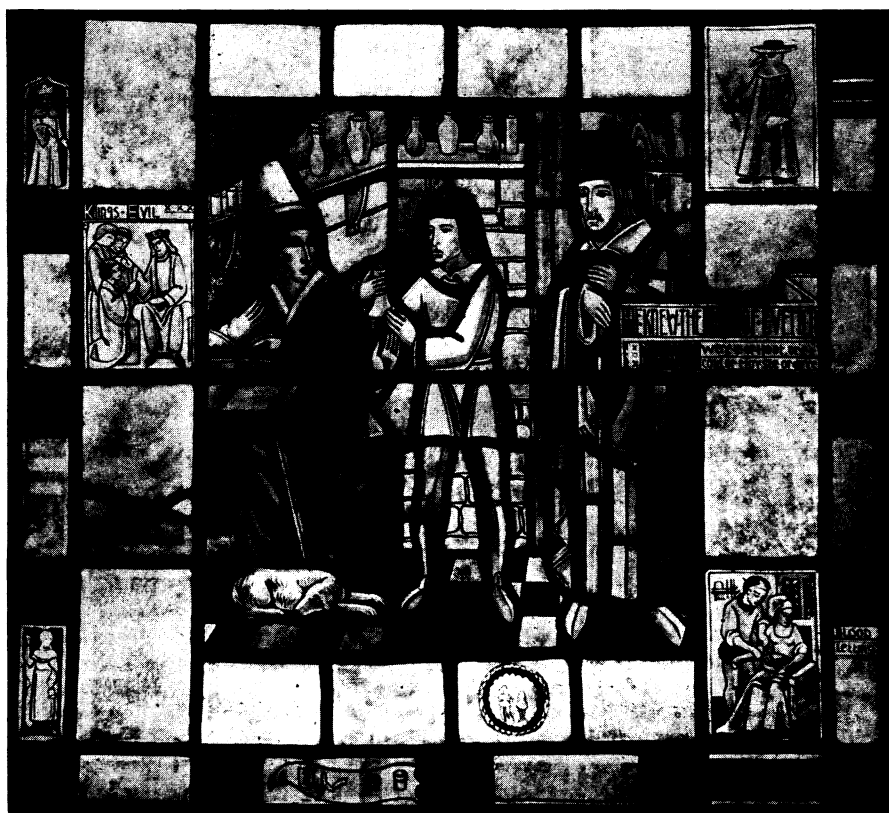
CHEMISTRY

Wax Heels and Toes for Longer Stocking Wear

➤ **RUBBING** a piece of candle wax or paraffin on the heels and toes of stockings before each wearing makes them last four times as long before holes appear, report textile specialists of the U. S. Department of Agriculture.

Laboratory tests show that a thin film of wax on stocking feet, routine treatment used long ago in wooden-shoe lands of Europe, will not interfere with the proper laundering of the stockings or change their appearance.

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MEDIEVAL PHYSICIAN—This panel of the east window in the Mayo Foundation House, shows the interior of the office of a medieval physician. The window is divided into three sections, representing the history of medical practice, the history of medical education, and the history of medical research. This photograph is reproduced from the *Bulletin of The Medical Library Association*, by Maj. Thomas E. Keys and Dr. Donald C. Balfour.