

PUBLIC HEALTH

Political Virus Smoked Out

Cyclical pattern followed by health hazard of political infection, Surgeon General Terry tells newspaper editors and Women's National Press Club in joshing diagnosis.

By LUTHER L. TERRY, M.D.

The Surgeon General of the U.S. Public Health Service, when editors of the nation's dailies were in Washington, delivered a report reminiscent of the famous cigarette and cancer inquiry. Here are his remarks verbatim.

► I'M GLAD to be here this evening for I have something important to tell you.

Now you know and I know that there will be no smoke-filled rooms at this year's conventions. But are you aware that there may be no conventions at all?

In science, as you know, one thing leads to another. Where there's smoke, there's politics. Where there's politics, there are people who are sick of politics. And where people are sick, your Federal Government steps in.

There was only one thing for me to do. I appointed an Advisory Committee on Politics and Health, composed of newspaper editors and other outstanding experts. The Committee has filtered and blended all the evidence. And I can now give you a preview of its findings.

Its general conclusion: politics is a health hazard of sufficient importance in the United States to warrant strong medicine.

The political virus seems to follow a cyclical pattern. It occurs in epidemic form every four years, with localized outbreaks in between.

Politics has been associated with an increasing number of health problems.

There is strong statistical and clinical evidence, for example, that politics is a major cause of foot-in-mouth disease.

Politics is a significant factor in the causation of strain of larynx, otherwise known as the hoarse laugh.

A serious vision defect medically designated as TV Stare (or the Huntley-Cronkite Syndrome) has shown an extraordinary rise, from less than nothing in 1940, to 17,354 in 1950, to 6,429,801 cases today. The evidence leaves little doubt that much of this increase is due to politics.

The twin conditions of limp hand and crushed knuckles have been unmistakably traced to politicking, particularly at the local level.

A chronic condition known as fence-sitting, often associated with politics in epidemiologic surveys, produces extreme tenderness in the seat of government.

A relationship also exists between politics and psychogenic disorders, such as delusions of grandeur, but the data are not adequate to decide whether the relationship is causal. The Committee did find, however, in a footnote on page 253, that (and I quote): "Politics makes strange bedfellows."

The Committee found that the more poli-

tics that people engage in, the greater the risk. In other words, politics taken in moderate doses probably won't do any harm but too much politics can leave you for dead.

I know that politics gives many people pleasure and that it is one of our biggest industries. People with the habit find it difficult to give up. But I ask you—would you wish to risk your health or the health of your children for the sake of a pleasurable habit? If you can't give it up completely, try to taper down with PTA or church politics—recognizing, of course, that any exposure is hazardous.

We have been asked whether a change in political brands would provide that extra margin of safety or whether health would be improved if people filtered their political convictions. The Committee found, however, that most politicians would rather fight than switch.

The Public Health Service, of course, will continue to do research on this subject. I understand that the Federal Trade Commission is considering plans to regulate misleading political advertising, such as platform promises, bumper stickers, and the like.

I hope all of you here will join us in our educational campaign to cut down on politics. I'll join you in a moment. Just as soon as I throw my pipe in the ring.

That concludes my lecture today. Now, I have just one more announcement. Next month I plan to name an Advisory Committee on Sex and Health.

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SURGERY

Physicians and Patients Neglect Ovarian Cancer

► DELAY in ovarian cancer diagnosis is reprehensible, with the blame shared by physicians and patients, a gynecology professor told a meeting in Chicago.

An estimated 9,000 women will die of this type of cancer in 1964 although early examination and surgery would cut this high rate. Up to 50% of ovarian cancers are inoperable when first diagnosed because they have been allowed to grow.

Only 15% of ovarian tumors are actually cancerous but they can grow to enormous proportions without causing pain. All tumors of the ovary are dangerous if not removed, authorities say, because it is almost impossible to tell which will develop into a cancer.

These malignancies are found in older and younger persons alike, Dr. Albert B. Lorincz told the Clinical Congress of Abdominal Surgeons, but the average age is

50 years. He is chairman of the department of obstetrics and gynecology, Creighton University School of Medicine, Omaha, Neb.

Although surgery is commonplace in the United States, with some 25,000 operations performed every day, the majority of patients are usually frightened, Dr. Hymel Fishkin of the Allegheny Hospital, Natrona Heights, Pa., told another session of the meeting.

Dr. Fishkin advised a few moments of common sense, plain language explanation to the patient to calm fears and give the right perspective. Doctors should omit those long Latin words they learned in medical school, he said.

A study of Americans who underwent delayed surgery, he said, showed that 47% of them had not realized they needed an operation, 10% could not bear the expense and 11% had been just plain negligent.

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BIOCHEMISTRY

Cholesterol Beneficial In Fighting Diseases

► CHOLESTEROL, the fat-like substance popularly blamed for hardening of the arteries and heart disease, may play a role in fighting several human ailments.

Although so far confined to animals, preliminary studies indicate germ-killing applications to tuberculosis, leprosy, viral diseases, and especially periodontal disease, the principal cause of tooth loss in persons over 35. Dr. Norman J. Doorenbos, professor of pharmaceutical chemistry, University of Maryland, reported his findings to the University of North Carolina School of Pharmacy in Chapel Hill.

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PUBLIC HEALTH

Lung Cancer Deaths High For Women Smokers, Too

► WOMEN WHO SMOKE are ten times more likely to die of lung cancer than non-smoking women, a study by the U.S. Public Health Service indicates.

But deaths among women smokers from lung cancer are only a fourth as great as among men smokers.

A study of 683 women who died of lung cancer in the United States in 1958 and 1959 showed a death rate of 101.4 per 100,000 population for female smokers. The lung cancer death rate for non-smokers is 9.4 per 100,000.

William M. Haenszel of the National Cancer Institute and his colleague, Karl E. Taeuber, now of the University of California, reported that, in general, the rates for women correspond to the mortality rates for men, in a study published in the Journal of the National Cancer Institute, 28:947, 1962.

The mortality rate for male smokers determined by the earlier study is 392.8 per 100,000, while non-smokers have a rate of 12.5. The study of females was reported in the Journal of the National Cancer Institute, 32:803, 1964.

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