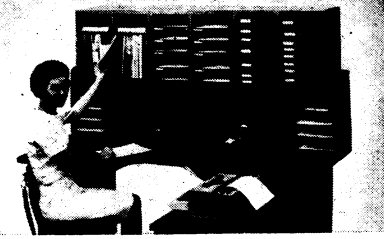


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FROM FINLAND

Alcoholism Therapy

Many physicians have recognized alcoholism as a disease but admitted that they could not treat it medically.

In Finland, where the problem has grown to great proportions, treatment today is largely in the hands of social workers using a modified casework technique.

These workers emphasize the social nature of the disease, but they talk like psychiatrists.

Miss Helmi Maki, social work supervisor of the A-Clinic Foundation, Helsinki, reported at World Health Organization headquarters in Geneva on the 10-year development of seven such clinics and their therapeutic procedures, during a discussion of mental health services.

A-clinics and adult guidance centers stand "on the borderline of the health field," she explains. A multidisciplinary team of workers serves the patients or clients, and the medical profession plays "an important part."

The social workers obviously carry the ball. Their aim is to assist the individual to function better socially, functioning on the "obstacles" between him and his environment.

What is alcoholism? There is no final, well-accepted definition in Finland but they feel it represents "conflict between the individual and his environment" and is a sign of the individual's "dissatisfaction." (British social workers and sociologists have also developed a scale and theories on "satisfaction.")

"Emphasis is not placed so much on the client being ill as on the fact that illness is involved," says Miss Maki.

The estimated number of unhappy alcoholics in Finland is 1,430 per 100,000—compared to an estimated 1,000 per 40,000 population for the U.S.—Finland registers problem drinkers, and last year 8,054 cases were handled by compulsory care, 996 by general hospitals, 579 by mental hospitals and 1,859 in the A-Clinics. AA clubs had almost 2,000 members.

The A-Clinic Foundation was established 10 years ago after several years of preparation and experimentation. Treatment is given both directly through outpatient services and indirectly through cooperating community agencies.

The Foundation was started by public and private agencies, alcohol study groups, medical societies and churches. These and the towns where the clinics are set up are represented on the Board. Half the expenses come from the State and the other from local authorities.

The annual budget is more than \$1 million.

Helsinki's Jyvaskyla clinic is the biggest with more than 500 patients, who pay \$1 to \$5 a month, all inclusive, for the "therapeutic value of paying."

The Finns are using group therapy more and more and find it very useful for alcoholics; they organize separate groups for men, wives, couples and unmarried women.

Another new procedure is to use clients in a "consultative" capacity. Each clinic has its "patient committee" that offers suggestions to the clinic and to the community. *David Alan Ehrlich*

FROM MEXICO

Physics Expanding

Mexico is preparing for expansion of its nuclear program, with major aims being to further increase the republic's growing need for electrical power and for desalination projects.

Other goals, with experiments now being carried out, include adaptation of nuclear energy for chemical transformation, food preservation by irradiation and the like.

"We are in a favored position here in Mexico," says Dr. Fernando Alba, director of the Physics Institute at the National University of Mexico. "But the transition to peaceful applications of the atom will take time, and it will be some decades in the future before a Mexican city can be run by atomic power.

"Still, we do not intend to be left behind in applications of nuclear energy for industry, for water projects to convert desert areas into producing agricultural lands, and in industrial applications."

Mexico's nuclear energy commission has been carrying on studies in construction of dual-purpose nuclear plants to desalinate seawater and produce electrical energy.

A joint accord between Mexico and the United States, signed in October 1965, is behind a project to study nuclear seawater desalination in a vast area embracing California, Arizona, Sonora and Baja California. The project envisions use of largest possible nuclear reactors and huge desalination plants, with both governments working jointly in development when plans move forward to activated stages.

Mexico can only become a full-fledged nuclear nation by leaning on the United States, and the most important key factor today is the development of trained physicists capable of furthering Mexican nuclear programs.

"There are about 200 physicists in

Mexico," Dr. Alba said, "but training of others is going ahead rapidly. In a new federal subsidy program, the most promising students are sent to the United States or Europe for advanced work.

"It must not be overlooked that we are just starting, actually, in the atomic field. The first Van de Graaff reactor was installed at the National University in 1952, just 15 years ago.

FROM GENEVA

Smallpox Campaign

Errors by technicians, popular superstition and consequent burdens on supervising doctors: these are among the experiences that mar an early progress report from Asia on this first year of the 10-year global smallpox eradication campaign launched by the World Health Organization.

The report has reached Geneva headquarters from the regional office for Southeast Asia in Delhi. It finds a "good beginning" has been made, despite many obvious and some bizarre problems.

Most critical is the supply of high quality, freeze-dried vaccine. The Soviet Union gets praised for giving Asia "hundreds of millions" of doses—a Russian health ministry official told a correspondent in Geneva it had almost hit one billion—mostly to India but also to her neighbors.

The region covers Afghanistan, Burma, India, Thailand, Ceylon, Mongolia, Maldive Islands, Nepal and Indonesia. It is the most populous of the six regions with India at almost 510 million and Indonesia, fifth biggest in the world, at 105. WHO and UNICEF are helping them to start their own vaccine production and providing testing facilities; Burma, Thailand, India and Indonesia have already started production (U.S. aid is pouring into West Africa for this campaign; Switzerland, France and Scandinavia are contributing to WHO's stockpile; German and Japanese doctors told a correspondent they plan to give freeze-dried vaccine as soon as they can produce WHO-approved quality.)

An odder problem: many Asian women won't let males vaccinate them. Team leaders also need strong persuasion to overcome stubborn "magic and witchcraft . . . and superstition about health."

Many villagers, vaccinators report, must be nagged not to obviate the vaccination by wiping it off, exposing their arms to the sun to dry the vaccine or to "cover the scratch marks with cow dung."

UN doctors warn that prolonged

stays of vaccine shipments in open air dumps at airports or rail terminals, without cooling facilities at peripheral depots, is jeopardizing the entire campaign through loss of potency. To illustrate, they say Russian stuff is air shipped 10 hours at temperatures between minus 20 and plus 20 Centigrade—time and temperature just within tolerance values. The vaccine must then be stored at 2 to 4 degrees C. Liquid or lymph vaccines deteriorate rapidly in the sun and WHO opposes their use. If they are not used, they must be discarded in seven days if stored at 0 to 10 degrees and 24 hours if at higher temperatures.

The Asian report says the incorrect reconstitution of the freeze-dried vaccine is often cutting the campaign success rate in half. Whenever it is reconstituted a day before use, it becomes as unstable as the old liquid vaccine.

Fortunately, "transmission is higher in the more densely populated areas than in the sparsely ones. (Hence) The immunity level must be raised in the cities." WHO officers are flogging systematic vaccination programs immediately in dense areas. They hope that "smallpox may spontaneously die out in remote, inaccessible areas where populations are scattered and travel is very costly and time consuming."

NOTES FROM ABROAD

Korea Fights Distoma

South Korean doctors are training Red Cross youth to wage a long-range health education campaign against a "grave national health problem," distoma. The parasitic disease is caused by the fluke.

Six million are believed infected and no available medication has been found effective. To prevent the infection, therefore, young volunteers will alert everyone to the dangers of eating raw fish and crabs, harborers of parasite eggs.

The campaign is the latest in the Korean Red Cross rural service program. Recently 684 high school students gave up their winter vacation to work in 172 villages.

Spanish Drivers Tested

Barcelona ophthalmologists are directing a new program designed to reduce traffic accidents caused by myopic drivers. At special centers set up by the city branch of the Spanish Red Cross, the doctors are giving appropriate tests. The program is still voluntary but could eventually apply to all licensees.

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