

and "in all probability with engines operating on 90-octane and 100-octane gasolines."

Science News Letter, January 27, 1940

ARCHAEOLOGY

Secret Room in Palace Baffles Archaeologists

PAGE Sherlock Holmes! British archaeologists digging out the ruins of a 3,700-year-old palace in Syria, have encountered a mystery room, suggesting the secret, hideaway chambers of whodunit fiction. And to date, the archaeologists have not solved the mystery.

Discoverer of the baffling scene is Sir Leonard Woolley, famous for his explorations at Ur of the Chaldees, and more recently director of British Museum excavations in North Syria.

Exploring a royal palace buried 25 feet under the soil at Atchana, ancient Alalakh, Sir Leonard found a flight of stairs leading to a basement level and barred at the foot by a low stone door. The door, cracked and broken, still could be turned on its hinges. Behind it lay enough evidence to conjure up thoughts of strange macabre doings in palace life of an ancient, unknown king.

Seen now, only the most enduring remnants of the secret are visible. Outstanding object is an oblong wooden box, collapsed, in which were packed four skeletons. In a corner of the room is a heap of ashes from a wood fire, and with it, bones of animals and some stone and clay vases. The designed secrecy of the barred room is emphasized by surrounding rooms, all for household routine.

Alalakh, scene of this palace mystery, is otherwise proving very enlightening to archaeological science. From its buried palaces, temples, statues, and pottery, seven stages of ancient history are coming to light, including much information about the little-known Hittite era. Alalakh in Syria was no provincial place. It had contact with civilizations of Egypt, Asia Minor, Mesopotamia, Cyprus and Crete.

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● RADIO ●

Dr. Albert F. Blakeslee, director of the department of genetics, Carnegie Institution of Washington and newly elected president of the American Association for the Advancement of Science will tell why people behave differently as guest scientist on "Adventures in Science" with Watson Davis, director of Science Service, over the coast to coast network of the Columbia Broadcasting System, Thursday, February 1, 4:15 p.m., EST, 3:15 CST, 2:15 MST, 1:15 PST.

Listen in on your local station. Listen in each Thursday.

PUBLIC HEALTH

Mayo Clinic Authority Urges Speed in Better Medical Care

Approaching Presidential Election Brings Danger That Problem Will Become a Political Football

A WARNING that we must now make haste in working out plans for better medical care distribution, to avoid having the problem become a political football, is issued by Dr. Hugh Cabot, of the Mayo Clinic, in his book, *The Patient's Dilemma* (Reynal and Hitchcock).

Dr. Cabot incidentally criticizes the American Medical Association for failing, in its handling of economic, social and political problems relating to medicine, to maintain its high standards and the judicious and judicial qualities which have characterized its handling of scientific problems. But Dr. Cabot's chief concern is in solving the patient's dilemma of being unable to find or to pay for good medical care.

The approaching presidential election makes speed essential, Dr. Cabot points out, if the problem of getting medical care to all the people is to be solved by sound plans.

With large bodies of people convinced and certain to state clearly their convictions that some change in medical care distribution is overdue, "the time appears to me," Dr. Cabot says, "to be short during which good-tempered discussion can hold the floor.

"Once the issue is joined between the political parties, action—possibly hasty—may well result," he warns.

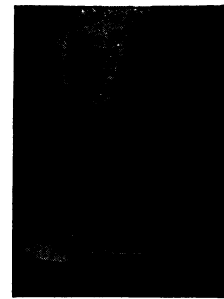
No formula for solving the problem exists, Dr. Cabot says. Disagreeing with proponents of compulsory health insurance, he states that while there is "much foreign experience to guide our footsteps, there is no foreign formula which can be applied—even in its general principles."

"The entrance of government into the distribution of medical care," he continues, "must have as its first step a secure foundation in the provision of a good personnel, good standards, and expert supervision."

Dr. Cabot seems to favor solving the problem largely at the state level. He says there is much to be gained by regarding the states "as a series of experimental laboratories." Local initiative, local financing with state grants-in-aid to communities needing it, a single state administra-

tive channel and state maintenance of standards are the principles he suggests for plans for medical care under government auspices.

Establishment and maintenance of fundamental standards, however, can only be



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