MEDICINE

K.P. Is Good Medicine

AAF surgeons find dishwashing is excellent for a man who has had a broken wrist. Special exercises and games for convalescent soldiers include ward police.

➤ "K.P. IS WONDERFUL for a man with a broken wrist," Lt. Col. Howard Rusk, chief of the convalescent training program, Army Air Forces, Air Surgeon's Office, told a group of newspaper women at a conference in Washington.

Harsh though it may sound, it is good medicine during convalescence because, Colonel Rusk explained, it keeps the man's hands in hot water, which is soothing and healing for such injuries, and wringing out dishcloths gives just the exercise needed to make the wrist supple again after weeks of immobilization in a cast while the bones knit.

Ward police, which involves picking up paper off the floor and similar activities, gives the bending and stooping that doctors have found beneficial in convalescence from back injuries.

One result of the special exercises and games devised for the convalescent training program is that men with broken bones get back to duty after the casts are removed in half the usual time.

As a check on the value of the program, 600 patients recovering from virus pneumonia were divided into two groups. Men in one group were allowed out of bed two days after their temperatures were normal and had the customary convalescent care. Those in the other group were kept in bed 10 days longer but were given the special convalescent training, both physical and mental. Those in this supervised group were back on duty in about two weeks less time than the others, and relapses occurred in only 3%. The relapse or recurrence rate in the unsupervised group was 30%. Scarlet fever patients averaged nine days less in the hospital and measles patients one week less when they had the benefit of this training program.

Important by-products of the program given by Colonel Rusk are: Less danger of blood clots after surgical operations because the exercise increases the blood velocity; 2. Different set given to the soldier patient's morale because through the program he becomes part of the Army again, instead of a lonesome, sick man.

The men are kept busy all the time. When not exercising to keep their muscles in trim, they are learning. Some wards are wired for radio so the men in this line of work can keep up code practice. After two weeks in this ward, it was found that the men were two to five words a minute faster than when they entered the hospital. In some wards flashlights are provided, the wards are blacked out, and the men signal from bed to bed to keep in practice.

Instead of looking at blank ceilings all day, patients in Air Forces hospitals look at model planes strung above their beds which they or their mates have made, and improve their ability to recognize different models. Others learn to make camouflage nets, an art which may later prove life-saving.

The convalescent training program is now being expanded to include vocational rehabilitation for the maimed and crippled. The day after the wounded Air Forces man enters one of the eight centers in the United States for this training, a vocational guidance director sees him and asks what he would like to do and helps him find a job he would like and can do either in the Air Forces or the Air Service Command. The wounded veterans, Col. Rusk declared, do not want pensions but the ability to work and carry on normal lives.

The rehabilitation feature of the program has great post-war possibilities for civilians. Labor and management, Col. Rusk believes, should get together to provide vocational rehabilitation for civilians who, through accidental injury or sickness such as heart disease, cannot go back to their former jobs. A good vocational rehabilitation program would save these men from the miserable state of living as invalids on the reduced standard necessary even when they have pensions.

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CHEMISTRY

Synthetic Menthol Can Be Produced from Thymol

➤ SYNTHETIC menthol which resembles natural menthol in its chemical structure can be produced commercially from thymol. Drs. H. B. Hass and A. L. Barney of Purdue University developed the new method of producing menthol artificially.

The synthetic menthol has the same taste and odor as natural menthol, they report to the American Chemical Society, and pharmaceutical differences, if any, are slight. The new process is one of distillation, beginning with thymol hydrogenated to a complex mixture of alcohols and ketones. Menthone is produced first, and this is then reduced to synthetic menthol.

Thymol is found in oil of thyme, of which there is no particular shortage at the present time. Natural menthol is found mainly in the Orient.

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