

MEDICINE

Doctors 'Too Immature'

► THE MEDICAL PROFESSION is "a bit too immature" to accept cancer centers such as those authorized by President Johnson for study and treatment of the disease, a Harvard professor said in Philadelphia.

The centers, in which doctors and scientists would work together on the same problems, have created almost as much opposition as Medicare among the medical profession, Dr. Langdon Parsons of Harvard Medical School told a Hahnemann Medical College symposium on tumors in women.

Dr. Parsons pulled no punches about the attitude of the physician who is loathe to admit that one of his cancer patients might have a better chance of recovery if a more highly trained doctor than himself could take over the therapy.

"Undoubtedly the most unpopular theme you can expound is the one that suggests that you can do something better than someone else," he said. "It will be a long time, I suspect, before the individual surgeon will be willing to have his patient treated by anyone else."

In spite of a lifetime of study and practice in obstetrics and gynecology, in which cancer of the cervix, or neck of the womb, has played an important part, Dr. Parsons said he still does not know the answers to many questions that might well be answered in a cancer center.

Among these unanswered questions are:

1. Is a cancer patient better treated at first by radiation or surgery?
2. How much disease does a cervical cancer patient have?

3. How many patients with "negative" lymph nodes actually had minute foci of tumor in them?

4. Do the nodes have a protective role and are we right or wrong when we remove them?

5. How does the natural resistance of the patient affect the growth pattern of a given tumor?

Dr. Parsons said geography and economics are the chief hurdles to the concept of a treatment center for malignant disease. If we in the United States would adopt the system now being used by Sweden, Norway, Denmark, England and Canada, where cancer patients are treated in specialized institutions, it might be cheaper than the costly duplication we face here.

• Science News Letter, 89:2 January 1, 1966

PUBLIC HEALTH

Viet Cong Immune To Variety of Viruses

► ALTHOUGH THE U.S. SOLDIERS in Viet Nam reportedly have the best modern medical care, Surgeon General of the Army Leonard D. Heaton, who has spent considerable time surveying the medical needs of the troops in Southeast Asia, admitted that he knew little of the health of the Vietnamese.

The Viet Cong, as well as many South Vietnamese, are immune to some viruses that affect U.S. men who have lived in a sanitary environment, he said. Dysentery,

malaria, hepatitis and other ailments that send Americans to the hospital apparently have little effect on soldiers who have grown up with these diseases.

The greatest need medically, not surgically, is for newer malaria drugs and for a vaccine against hepatitis, Gen. Heaton noted. Quinine is used against malaria viruses that have become resistant to synthetic drugs such as chloroquine. Gamma globulin is given to combat hepatitis.

A vaccine against hepatitis would solve the problems this infectious disease presents, the general told SCIENCE SERVICE.

The virus isolated by Dr. Joseph D. Boggs of Children's Memorial Hospital, Chicago, in cooperation with Parke, Davis & Co. Laboratories, Detroit, has been injected into volunteer prisoners in the Joliet, Ill., Federal prison. Studies showed that there is more than one type of hepatitis virus.

Figures on casualties and deaths in Viet Nam are far below those in previous wars, partly because of the speed of helicopters that get men to hospitals in battle areas. Gen. Heaton said that circumstances were so different in the present conflict, however, that statistical comparisons should not be made.

Families of men fighting in Viet Nam can be assured that, whenever possible, immediate attention is given to the wounded men's needs, Gen. Heaton said. Only in cases where aid men themselves are killed on duty is there delay in caring for the casualties. Serious cases are flown back to the United States.

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SOCIOLOGY

Welfare Program Urged For Vietnamese Children

► A PROGRAM to reunite orphaned South Vietnamese children with their relatives was proposed to the White House.

The proposal is to coordinate all welfare efforts in a new emergency child and family service, a joint U.S.-Vietnamese program using Vietnamese personnel.

Many children are placed in orphanages because relatives cannot be located, the National Citizens' Commission reported to the White House Conference on International Cooperation. Lack of personnel and coordination, plus difficult communications, have stymied efforts to locate relatives.

The future for an institution-reared child is particularly sad in Viet Nam. He has limited opportunity for work and marriage without family connections, the committee reported.

President Johnson established the National Citizens' Commission on International Cooperation early this year to explore and discuss "every conceivable approach and avenue of cooperation that could lead to peace."

Two welfare posts in New Delhi and Rio de Janeiro worked so well in establishing good relations with India and Brazil, that the State Department should consider providing at least one attache for each major geographical area, the committee urged.

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U.S. Army

HEALTH CARE IN VIET NAM—The wife of a Vietnamese defense soldier holds her son as U.S. Army Dr. Carl A. Schwers Jr. of San Antonio, Texas, checks for possible respiratory illness.