

## WHAT TO DO DURING INFLUENZA EPIDEMICS

No sure way of preventing an attack of influenza is yet known to scientists. There are, however, certain precautions which health authorities and physicians agree should be followed during influenza outbreaks.

### For Protection

Make more than the ordinary effort to increase your well-being when influenza, colds and upper respiratory infections are prevalent.

Here are eight rules useful in guarding against the disease:

1. Secure adequate sleep and rest (eight to ten hours' sleep every night with windows open, but under enough covering to keep warm).
2. Eat a moderate, mixed diet and partake freely, at regular periods, of pure water (six to eight glasses daily).
3. Wear clothing to suit the environment, particularly clothing which prevents chilling of the body surfaces and which keeps the body dry.
4. Avoid people with colds, especially those who are sneezing or coughing. There is more danger from contact with those just beginning to feel sick than from those ill enough to be confined to bed.
5. Keep out of crowds as far as possible, especially crowds in closed places.
6. Avoid the use of common towels, wash basins, glasses, eating utensils, and toilet articles.
7. Wash the hands thoroughly before eating.
8. Avoid alcohol and stimulants of all sorts.

### For Treatment

If you get the disease, follow these four recommendations to prevent becoming seriously ill.

1. If you have a cold, feel badly, or are feverish, go to bed at once, send for a physician and follow his instructions.
2. Do not take any so-called cures. There is no specific cure for this disease.
3. If you cannot get a doctor, remain in bed, eat a simple diet, take plenty of fluids, such as water, fruit juices, milk, bouillon, hot soups, at frequent intervals. Use a mild cathartic if constipated.
4. Remember that the most important measure for preventing pneumonia or other serious complications is to remain in bed until all symptoms have disappeared and then, under the physician's advice, to return very gradually to your usual physical activities, being sure to rest before you get tired.

### PUBLIC HEALTH

## Flu Cases Triple in U. S. During Week

**I**NFLUENZA cases more than tripled in number during the week ending January 9, reports from state health officers to the U. S. Public Health Service show. During this week, the latest for which nation-wide figures are available, 12,145 cases were reported as against 3,993 cases for the previous week.

The Middle West was hardest hit, it appears from the reports, though South Carolina reported over seven hundred cases and New York City nearly two thousand. New York State outside of New York City does not require reporting of influenza cases and there was no influenza report from Pennsylvania.

The number of cases, although greater than last year at this time, is still so low that public health authorities do not consider that the disease has reached epidemic proportions as yet in this country. In Europe the situation is apparently more serious. Dr. F. G.

Boudreau of the Health Section of the League of Nations has informed the Surgeon General of the U. S. Public Health Service that influenza "was showing an unusually early tendency to assume epidemic proportions in Central and Northwestern Europe, especially in Berlin, Copenhagen and London."

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### MEDICINE

## Biggest Accident Risk for Front Seat Passenger

**T**HE GIRL in the front seat runs the big risk in motor accidents.

Seventy-five per cent of the severe, crushing facial injuries sustained in automobile accidents occur to the person riding beside the driver, in the experience of Dr. Claire L. Straith, Detroit plastic surgeon. The majority of these victims are young women.

Lacking the support of the steering wheel, which often saves the driver, the guest-passenger is thrown forward more violently at the impact. The passenger's head strikes the instrument

board, where projecting handles, knobs and cranks add to the hazard.

Elimination of projecting objects from the passenger's side of the instrument panel should be attempted by motor car engineers, Dr. Straith declares in an article on facial injuries caused by motor accidents. (*Journal, American Medical Association, Jan. 9.*)

The use of "crash padding" on the instrument panel might do much to minimize the seriousness and extent of this type of injury, believes Dr. Straith.

Facial disfigurements resulting from such accidents often cause psychologic handicaps that ruin social and business careers, the Detroit surgeon states. He says:

"The ranks of the unemployed and unemployable are already large enough without adding to their numbers persons physically and mentally handicapped by preventable or curable facial defects."

The plastic surgeon cannot expect good results in face injuries unless the first aid treatment has been carefully done, asserts Dr. Straith.

Plastic procedures, such as correcting scars, crushed facial bones or lost eyebrows, ears and nose, should not be undertaken until two months after every trace of infection has disappeared. He tells physicians how he replaces severed noses, using skin grafts from the forehead of a woman patient and from below the ear of a man patient.

In the same issue of the medical journal, Dr. Lowell S. Selling, also of Detroit, discusses tests for automobile drivers. His recommendations are based on studies made at the psychopathic clinic of the Detroit Recorder's Court, traffic unit.

"Licensing drivers by means of physical and mental tests will be more or less of a farce," Dr. Selling states, "until physicians themselves give examinations to motor car drivers and until they compile data showing just where the line must be drawn between adequate and inadequate physical capacities."

A man with two artificial arms has been driving a car for twenty years without an accident or a violation of the law. But it requires the decision of an experienced and highly trained individual to determine whether such a handicapped person is capable of safe driving, in Dr. Selling's opinion.

A doctor's certificate as to organic soundness can be easily requested by licensing officials, Dr. Selling says, even though the law does not demand it.

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