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TOWARD A HEALTHY AMERICA

By Paul de Kruif

Univ. of California

Are we a healthy nation?

What new cures has science found?

To what extent can disease be prevented?

What kind of a program is needed?

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TOWARD A HEALTHY AMERICA

By
PAUL DE KRUIF

YOU, as an American, are awakening to the fact of needless sickness and death, to the widespread erosion of the lives of millions of our people. You have been told that nationwide human conservation is now possible, not only in scientific theory but practically. But you may not know what such a program may mean to the 130 million called the American people. It is to your interest to realize what a powerful health army may mean to your own and to you.

Condensed by permission from two articles by Paul de Kruif, one of America's leading writers on science and medicine, which appeared recently in "The Country Gentleman." For additional information on health problems the reader is referred to "Doctors, Dollars and Disease" and "Who Can Afford Health," Public Affairs Pamphlets Nos. 10 and 27.

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It Can Happen to You

SOMETIME this year you yourself may walk, weak in knees, out of your doctor's office. You have just been told that, to save your life, you must have a grave operation. Cancer is not directly mentioned, but it is hinted to you. Do you, or do you not live in one of those great areas of our country where doctors have not yet learned to diagnose early cancer in time to save you? Or in one of those vast areas where doctors haven't the equipment to save you even if they do find your peril in time?

The chances are that in your locality there exists no laboratory to diagnose the type of pneumonia microbe that, this year, may suddenly bring you to the brink of death.

Do you know what chance there is in your county, village, or city that your sister's or wife's childbirth will be safe, that it will not result in her own death or lifewreck?

In your particular community, if she has come safely through the ordeal of childbirth, what chance is there that she may be spared—to grieve over a child stillborn, or blind, or imbecile, or healthy for a time only then to die?

You cannot be sure there is some special protecting angel watching your brothers and sisters, or present or future children, guarding them from the deadly bite of the germ harbored by our 400,000 actively sick consumptives.

These are a few of the perils, among all the now preventable, controllable, or curable sicknesses that wear away American humanity, that keep millions in our nation less than half alive.

That is the reason why you should be interested in a program for nationwide human conservation.

Are We a Healthy Nation?

JUST AS the people are beginning to demand that they be given

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jobs that will give them the decent, yes, the ample living their land could give them, so they are becoming restless about the more and more glaring fact of their own sickness.

Our doctors, with miserably inadequate means at their disposal, have won partial victories over certain illnesses. In the past generation there has been a downing of death rates of tuberculosis, diphtheria, typhoid fever, and some of the diseases of children. But do these triumphs mean we can call ourselves a healthy nation? Nothing could be more stupid than to point with pride at the front of our house of health while we ignore the termites of unseen disease that eat within it.

The existence of millions of persons scarcely half-alive mocks the claim that we are a healthy America. Let us add up this total, in figures that do not lie, then subtract the number of diseased from our 130,000,000 and see what we have left for a healthy America.

TUBERCULOSIS

Seventy thousand of our people are still dying every year from tuberculosis. But out of 130 millions that is not so many, you say! You point out the gratifying decline during the past generation in T B's death rate. Yet, as a murderer of Americans between the ages of 15 and 45, the T B germ is surpassed only by accidents. But you say that tuberculosis has dropped to seventh place in the race of America's champion killers. Yet, for every one of the 70,000 dying, five others are actively sick with consumption—totaling 420,000. Then there are unknown hundreds of thousands whose consumption has been "arrested"—but who can't do a man's work, who must live under wraps, not as vigorous citizens.

PNEUMONIA

If you say that this is not yet a large part of our 130 mil-

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lions, you must not forget another lung-sick army. Pneumonia kills more than 100,000 people yearly. And since only one dies out of six who go through the ordeal of this strangling agony, a total of 600,000 of our people are, yearly, either put out of action permanently, or unable to work for weeks or months, or wrecked for longer by the poisonous results of the pleurisy that may follow pneumonia.

CANCER

Cancer, of course, has long been feared by all, for it kills 140,000 Americans yearly. But for every one of these, several others are sick, in terrible pain, or bed-ridden from cancer's malignant torture, or knocked out by the operations that are attempted to cure them, or wrecked by the terrific pain that often results from the deep X-rays and radium that may be the only hope for them, or gnawed by worry about these cures that have a good chance of failing.

INSANITY

Now our millions of not essentially healthy Americans are growing. Another and particularly pitiful annual class of recruits for America's rear guard must not be forgotten. These are the mentally sick—at this moment 500,000 of them crowd our asylums. And authorities have figures to show another half million, still at large, but definitely psychotic, many of them dangerous, none reliable, producing citizens or to be counted as possible defenders of our nation.

SYPHILIS

The blood test dragnets now being swept through communities by our healthmen make it clear that more than 5,000,000 of our people carry the blood taint of syphilis. You say we overlap here, that part of these have already been counted, among the mentally sick. Yes. But only 10 per cent

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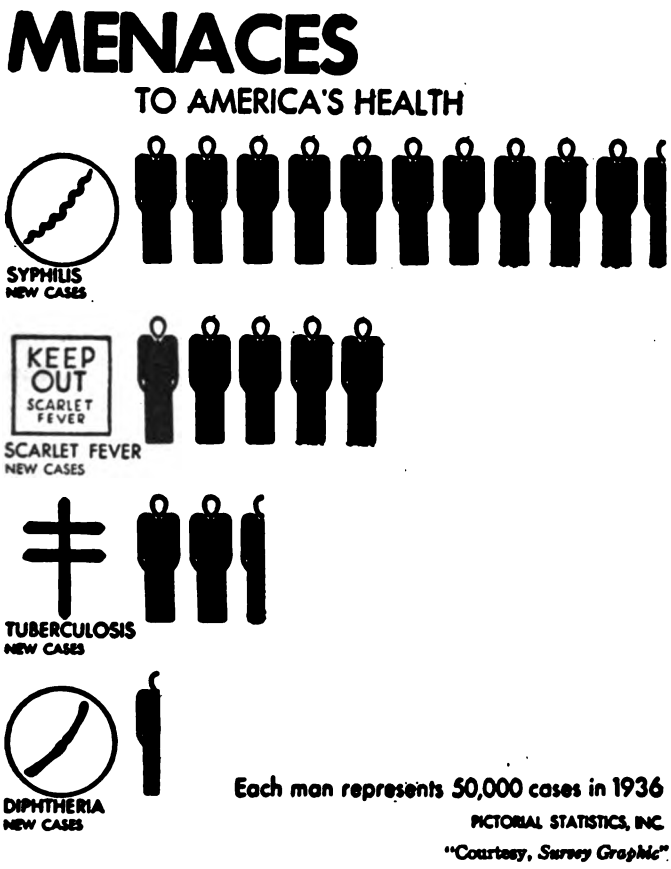
of the first admissions to our asylums are brought there because of the corkscrew germ. It is here admitted that syphilis gnaws very silently, often, and far under the surface of what



seems a healthy exterior. It kills only 50,000 of our people, yearly, with syphilitic heartwreck, but that does not count the heart*sick* hundreds of thousands who cannot do a day's work because of this sickness. And other hundreds of thousands are vaguely sick, deeply under par because of this blood taint,

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lacking in energy, and sluggish and feeble in thought, inattentive to tasks—knowing their condition—they worry.

And what of the 60,000 little ones born alive with syphilis yearly; and of the scores of thousands blinded and maimed by it, how many are to be counted strong, productive Americans?

Even at life's beginning, when life should be lusty and strong, the condition of American mothers, bearers of life, cannot be viewed too happily. It is true that only 14,000 American women die yearly during pregnancy and childbirth. Yet some 200,000 others become invalids as their reward for bringing life to our nation. And, just as life is not kind to hundreds of thousands of mothers, so life is denied to 75,000 babies stillborn yearly. Life is cut short for another 70,000 carried out in little white coffins within the first month of their arrival on earth.

CHILDREN'S DISEASES

This catalog may be lightened by one item of which our doctors are proud. This is their beginning of conquest of the diseases and deaths of childhood. Here the forces of human conservation have begun to draw up real power. Even so, every year, among the healthy millions of our young America —aged one month to fifteen years—140,000 die. Death can fairly be called merciful when he comes for many of these. For each one who dies, many are sick but survive these sicknesses of childhood. Many recover without a trace. Many never recover, but live—but that is all. Thousands are marred in one vital part or another, left at the post in the stern race to earn their livings. In 1918, one out of three of all the young men of the November replacement draft in three of our healthiest Midwest states was returned home, unfit for military service.

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OTHER DISEASES

We are showing you the other side of the rosy picture of our supposed healthy America. This is what you see when you look beyond the optimistic death-rate reports on one single sickness. These are some of the millions whose suffering, added together, is so terrible that we must turn away our eyes from this mounting roll call of misery. Here have been counted only part of a grim army of suffering humanity, which if it had the strength to parade before us, would stretch from coast to coast. To those already counted, other armies must be added—those whose strength is sapped by malaria; twisted and pain-racked from the rheumatism of gonorrhea and other preventable infections; pellagrous; or with hearts and nerves wrecked by their hidden hunger for vitamins lacking in the food of undernourished millions.

Many millions of these do not die. They do not even show up in sickness rates. They cannot be counted among the truly living. They all add to the final roll call of our deepest national disgrace. Their condition is disgraceful because their suffering, their deaths are, by now known science, either wholly unnecessary or to a greater or lesser degree controllable.

We have said nothing of the diseases that, in prime of life, hit the hearts, the blood vessels, the brains of millions of our people, because these are not yet preventable and our searchers are only now just groping for their cause, their possible prevention, or cure.

We speak here only of preventable illness that strikes—in one form or another—into every home in America, that may strike you, or your family.

Progress of Medical Science

But if this fact of half-life, of death, is a nightmare, we can

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do more than shudder with fear of it. The opposing fact is equally true and much more hopeful than any fact in America's or in any other nation's history. This fact is the existence, today, of a great body of volunteers for an army of human conservation. These are our searchers, men of mercy, healthmen and doctors, not yet organized but ready to serve in a mass attack on sickness and death rates, in a nationwide fight for life. In this or that laboratory, in isolated, far-flung health departments, in homes, in sometimes obscure hospitals from coast to coast they fight brilliantly against all kinds of sickness.

Where formerly they might save tens with costly science, now they can save hundreds of thousands because their weapons become all the time better, more practical, more economical. By the X-ray's magic eye they now pick up the first faint threat of consumption. At first this X-ray was far too costly to be generally used in finding tuberculosis. Then, clever paper X-ray films brought X-ray pictures by hundreds of thousands within some health department budgets. Now comes news of a high-speed X-ray that will cut the cost of looking for T B's danger to five cents a person.

NEW CURES

The long-drawn-out, costly bedrest, *maybe* cure of consumption is reinforced and shortened by the surgeon's curative knife and the artificial pneumothorax. The wiping out of the white death is now practicable.

The cost of fighting syphilis with arsenic drugs and bismuth has been a serious problem; and the average time needed to cure it—18 months—has been terribly long. Now comes safe artificial fever. Combined with safe doses of drugs, it greatly cuts down the time and cheapens the cost of cure.

Pneumonia, which a few years ago killed one out of three

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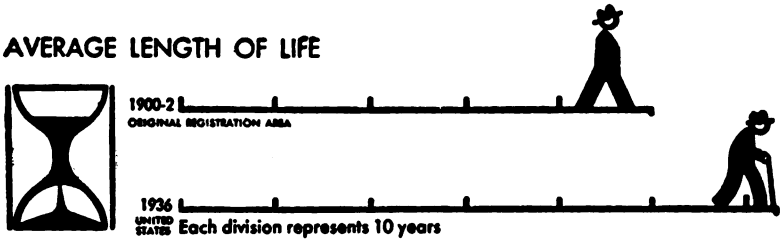
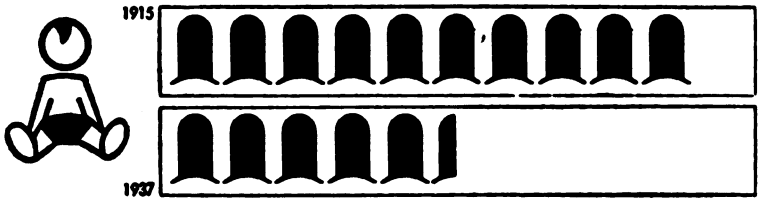
HEALTH GAINS IN THE UNITED STATES

AVERAGE LENGTH OF LIFE



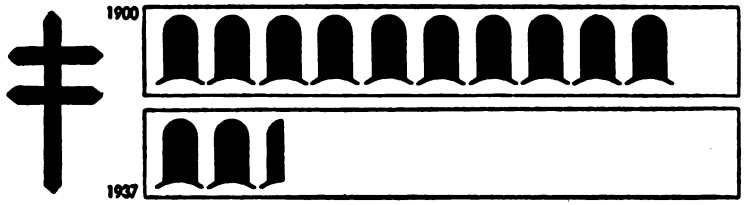
Each division represents 10 years

INFANT MORTALITY



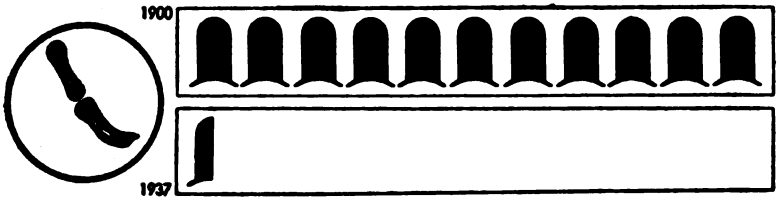
Each grave represents 10 deaths per 1000 live births

TUBERCULOSIS DEATH RATE



Each grave represents 20 deaths per 100,000 estimated population

DIPHTHERIA DEATH RATE



Each grave represents 4 deaths per 100,000 estimated population

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of all attacked by pneumonia microbes, now—in many of its types—succumbs to serums so powerful that apparently doomed people are cured in a few hours. There is hope of a simple drug cure of the deadly lung inflammation. And when doctors and the common people get together to use simple tricks now known to prevent it, pneumonia sickness as well as death can be greatly cut down.

Cancer, caught early and in parts of the body get-atable by the surgeon's knife, or by deep X-ray or radium, now loses its terror to such an extent that for the first time people begin to speak openly without hushed voices about having it.

The science and art of obstetrics is now so powerful, that, among more than 18,000 births in the slums of Chicago, the mothers have a death rate six times lower than that of the nation as a whole. The improvement in their own baby-bringing science by Chicago's doctors, led by Health Commissioner Bundesen, has cut the rate of dying of newborn babies far below that of the average of our country, below that of any large city in the world.

The imbecilic doom that awaits all but a very few of the hundreds of thousands of those stricken with dementia praecox—the brain sickness that crowds our asylums with 80 per cent of their incurables—this can now be fought by the insulin or metrazol shock treatments, if this miraculous help is not delayed too long.

The pitiful melancholia of women at their change of life, which also helps to fill our asylums, can now usually be nipped in the bud by the new powerful sex hormones. The pellagrous insane, and certain mysteriously crazy people with no sign of pellagra can be brought back to absolute clear-headedness by the chemical magic of the cheap vitamin, nicotinic acid.

The life-wrecking consequences of gonorrhea in women, its torture to all whose limbs it twists with rheumatism—these

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can in the great majority be cured by artificial fever, or sulfanilamide, or a combination of both.

NEW HOPE—AND DESPAIR

Such is a part of the power of known science, now already in action—against a tiny part of our gigantic human erosion. Each of these discoveries is a true story of hope for thousands of stricken ones in our nation. But for the most of these suffering ones these stories of hope now turn to ashes. They are stories with unhappy endings. Because for millions reaching for now possible strength, it is still denied. If you are sensitive, it is worse for you than the hands of the drowning stretched up out of the water, worse than the screams of victims trapped in floors of burning buildings. But into human conservation, sentiment must not enter. There is no yardstick to measure the heartbreak, the sorrow of needless human suffering. It is not sympathy but the waste of human energy that here concerns us. It is the enormous loss of national wealth that can be counted, that can be combatted by scientific methods.

Resources for Health

THE CAUSE of the lag between the discovery of our life-saving science, and the use of it, for everybody, is not far to seek. It is simply that there has been no adequate nationwide program of human conservation. The following three facts are indisputable: the preventive health services of the nation are not meeting the need. The hospital, laboratory, and health-center facilities are greatly inadequate. Fully one-third of the nation's people—with small or no incomes—get totally inadequate or no medical service at all. These facts are accepted by the House of Delegates of the American Medical Association.

Less than a third of our counties, and an even smaller pro-

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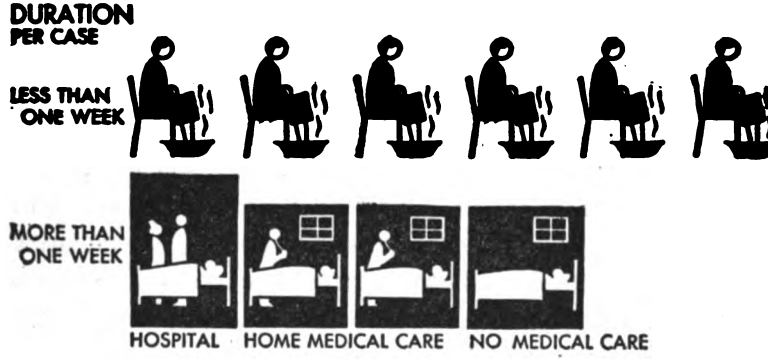
portion of cities have full-time, trained health officers. This means that our war against sickness and death is like fighting a battle in which the soldiers on two-thirds of the sectors of the front have no commanding officers. Great areas of our country—especially rural ones—are wholly without public

DISABLING SICKNESS AMONG THE POOREST THIRD OF THE NATION



Each symbol represents 2 million cases in 1935-36 NATIONAL STATISTICS, INC.

health nurses, who are the scouts to spot sickness and death. Wide areas, especially in the country, have not the general hospitals, the health centers, the laboratories which are the strongholds, the scientific intelligence services and staff headquarters needed if our death fight is to be more than a mockery.

Nor do the states do the job that the localities fail to do. The average budget of our state health departments is at the amazing level of 11 cents per person in the population. It is interesting to think of this, at the same time remembering that the cost of just keeping consumptives in hospitals in a city like Detroit, the cost of keeping that needless plague in existence, is more than one dollar for each of Detroit's citizens yearly. Just for keeping tuberculosis going!

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The Doctors Are Ready

OUR HEALTHMEN and doctors know what deaths can be wiped out, which ones controlled by now known science. They are ready now, without further fact finding, to begin to build health, to save lives. They know exactly where mass tragedy and waste of human life is greatest. They can begin at once to call a powerful, volunteer health army to battle. The physicians, laboratory workers, healthmen, and nurses already exist and can be quickly trained into an effective force for human conservation. Our medical schools and universities are turning out the ablest body of young doctors and scientists in the world. Our medical and health leaders agree that the death-fight must be fought in a democratic, American way. The leaders of the American Medical Association have gone on record that the rank and file of that greatest of all professions are ready to join the fight provided it is organized without socialization of physicians.

All branches of government, local, state, and federal, can profitably help this human conservation with the necessary money. The amount needed is small, compared to the billions of dollars that we now waste, poured down the rathole yearly to maintain the horrid luxury of preventable misery, sickness, death of millions in our nation. It is not a matter of spending money. It is merely the sound business of turning aside part of the vast sums now wasted in maintaining preventable human erosion; turning it aside to stop that erosion and save the great wealth now wasted.

Human conservation is the soundest of all self-paying national programs. The expense of keeping sickness with us plunges us more and more deeply into debt. A part of this money wisely spent will begin lifting the tax burden, save us billions of dollars.

All over the country movements are growing to insure

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people of modest means against the all-too-heavy cost of sickness. The State Medical Societies of Utah and California have already officially approved such insurance. But a vast proportion of this sickness demanding insurance payments can now be prevented. Why then should we content ourselves with locking the door after the horse has been stolen from the barn? Why not wipe out that sickness and save the commonwealth most of this insurance money?

How can this program of nationwide human conservation be put quickly into action? With the people, their physicians and healthmen agreed that this can be economically done, what then can possibly keep us from a real fight against human erosion? And what may this human conservation program mean to you?

AN AMERICAN HEALTH PROGRAM

WE ARE still a democratic people, our government is not by decree, but by vote of the people, so it is inevitable that of the plans* for nationwide human conservation, some will be crackpot, some will be truly practical, and some will be a mixture of both.

Among these plans is one which provides for the organization of a nationwide, essentially volunteer health army of federal and state healthmen, of physicians, laboratory workers, engineers, and nurses to begin a general attack upon the sickness rates and death rates of all preventable, controllable disease and death. This is an integral part of the National Health Program drawn up by the Interdepartmental Committee to coordinate Health and Welfare of the United States

* For a survey of some of these plans see "Doctors, Dollars, and Disease," Public Affairs Pamphlet No. 10 (Revised Edition, 1938).

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Government.* It would affect all classes and levels of Americans, regardless of their economic status, their color, their religion.

The plan of this campaign must be as cold, as heartless, as matter-of-fact as an engineering blueprint. In it sorrow or heartbreak or human sentiments get no consideration. The economics of the fight are as sound, yes, sounder than those of our most successful industrial corporations. Their arithmetic is simply this: That the cutting down of preventable sickness and death rates, the raising of the physical and mental strength and energy of the American people, will cut down the present enormous drain of sickness and death upon the nation's pocketbook, upon the nation's taxpayers.

The primary and basic interest of the healthmen, scientists, physicians, and financiers who are ready to launch this great fight for life is not the medical care of the sick or the cure of diseases already existing. Their aim is, bluntly, the elimination of all preventable sickness and death. Here is their promise:

What Can Be Done

THEY WILL make tuberculosis negligible within a generation. They will wipe out malaria within a dozen years. Before your own babies have grown to manhood or womanhood, the danger of syphilis will be a vanishing one. Your daughter's chance of dying, or of permanent lifewreck from bringing your grandchildren into the world, will be cut down two-thirds. The chance that her babies will be born and live, strong and healthy, will be doubled. If you are a young man or woman today, your chance to die from cancer will be a third less than it is now. Pneumonia, too, will be a third less

* For the remaining points on this program, see "Who Can Afford Health," Public Affairs Pamphlet No. 27, 1939, p. 29.

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A PROGRAM TO RID AMERICA O

ADVICE AND FINANCIAL AID



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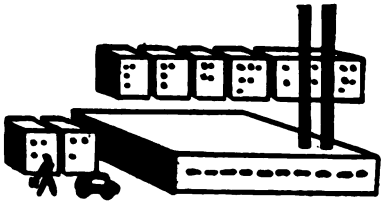


COOPERATING PHYSICIAN

PROGRAM PLANNING



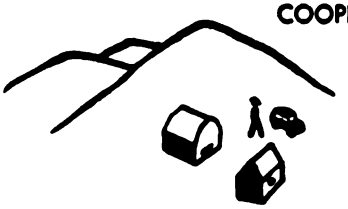
STATE DEP'T OF HEALTH

STATE MEDICAL SOCIETY



PHYSICIANS

COOPERATING PHYSICIAN



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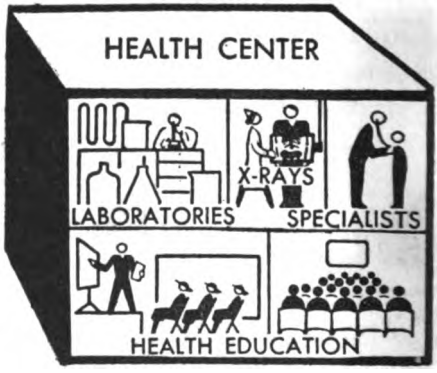

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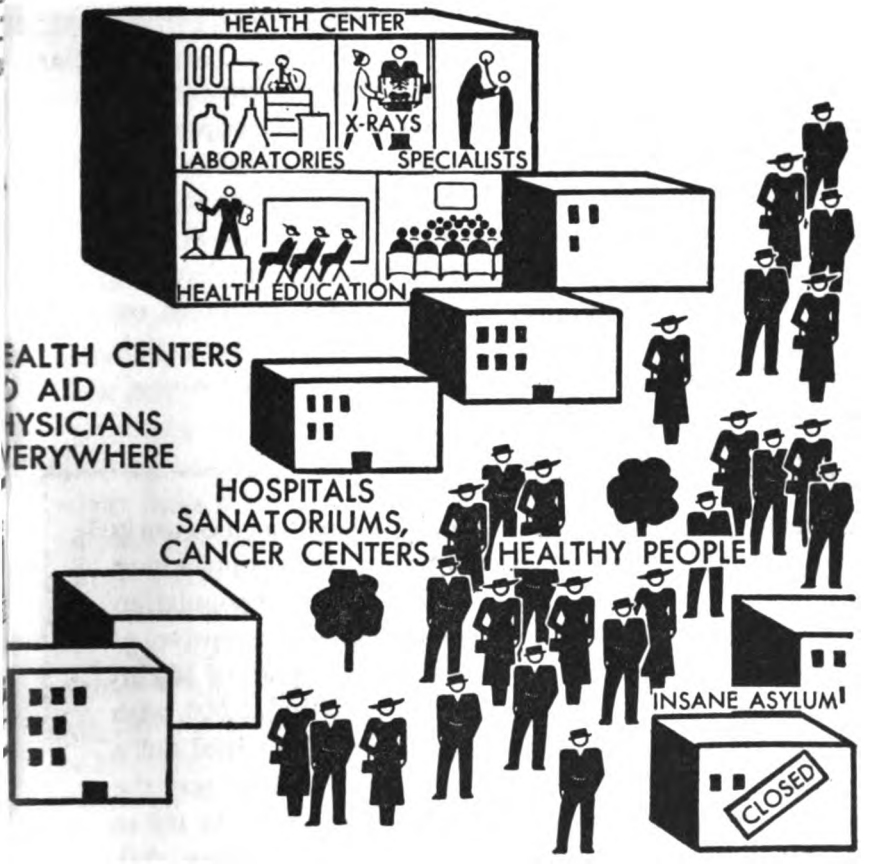
UNNECESSARY DISEASE



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likely to kill you. And as for insanity, the keepers of our asylums will have to begin to look around for inmates to put in their beds and their padded cells.

Mind you, with now known science these triumphs can today be predicted. With new science constantly discovered in our laboratories, these victories at the end of a generation will be far surpassed.

A Practical Program

THIS CAMPAIGN for nationwide human conservation contemplates nothing revolutionary. It is based upon this simple fact: That wherever mass suffering, sickness, and death rates have already been cut down, these victories have not been won by a haphazard system of individual doctors taking care of individual patients. The notable saving of American lives, of American taxpayers' money, has followed a volunteer co-working of healthmen, physicians, laboratory workers, engineers, and nurses.

What Localities Have Done

FOR EXAMPLE, in my own state, Michigan, healthmen co-working with practicing physicians and public health nurses have cut down diphtheria death from 25.2 per 100,000 population in 1920 to 1.4 in 1937! The powerful toxoid preventive, of which the state laboratory produces enough for all of Michigan's children for an annual total outlay of only $35,000, with the paid assistance of competent physicians, has wiped out a diphtheria hospital bill of $500,000 yearly. This was the amount needed to *maintain* diphtheria, to nurse, to try to cure Michigan's strangling, dying, diphtheria-stricken children.

Against the plague of syphilis, the healthmen, physicians,

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and laboratory workers of the state of Wisconsin have won a similar stunning victory. In 1916, out of every 100 first admissions to that state's insane asylums, 13 came stricken with the imbecilic doom of brain syphilis, known as paresis. That year —for all of Wisconsin's practicing physicians outside Milwaukee County—the state laboratory offered free blood tests, to be taken upon all of the patients of all the state's doctors, whether or not syphilis was suspected. By this simple system of a statewide, volunteer blood test dragnet, finding syphilis, then treating it, Wisconsin's physicians by 1937 had cut the tragic parade of paretics into the asylum from the high of 13 per 100 first admissions down to a low of four!

And the blood test was free to doctor and patient. It cost the state five cents per head. It had cost the state $2,000 to maintain each syphilitic victim in the asylum until he died. So the state's taxpayers have been saved millions. The doctors have increased their practices. Thousands of citizens heretofore doomed to imbecile death are working, supporting their families, adding to the wealth of Wisconsin.

Among a very few of our large cities, Detroit is today showing how mass consumptive death rate can be put down when healthmen and physicians are supplied the modest amount of money needed to spot early tuberculosis. In 1936, purely on the basis that the city was helping to bust itself financially in having to maintain its tuberculous sick, the city put this one part of a human conservation program into action. It was costing the city $3,500,000, roughly, to maintain tuberculosis each year. In 1938, while the T B death rate in Michigan *outside* Detroit went up, the city's consumptive death rate went down by 17.5 per cent!

Must Be Nationwide

Of course, if individual cities and states can win such stir-

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ring victories, you ask why all over the nation similar battles can't be waged, strictly locally? Why a nationwide health program? The answer is simple. The states, counties, cities, have not the financial power to fight all preventable sicknesses and death. Detroit, for example, may be able to fight tuberculosis, but has not got the money to begin a mass attack upon death rates from cancer and pneumonia. So it is all over our nation. The health army needs vary enormously. Hospital beds are fewer, laboratories fewer and less efficient, healthmen and nurses fewer in numbers and less highly trained in one locality than in another.

Yet the cancer that kills the Florida farmer is the same as the one that gnaws at a Montana businessman. The T B microbes that kill Alabama Negroes are exactly the same as those that waste away Nebraska plainsmen. The dark spots of every sort of preventable sickness and death are well marked now. The healthmen and physicians of our far-flung states and localities cannot begin the human conservation campaign unaided. And the federal government, not regimenting them, mind you, must advise them, and equalize their death-fighting sinews of war.

Maybe you worry about the skill of our healthmen, physicians, and laboratory workers in handling the sums that will be provided for conservation? The answer is that our death-fighters have already proved themselves as efficient as the best industrial engineers in cutting down the cost of preventing sickness and death. If our healthmen's business ability is to be criticized, it is only on the ground that they have not called in bankers, auditors, to show how the money costs of human conservation have already been lowered. They have never been financially credited for the money-savings already made to their communities.

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Health Work Starved

NATIONWIDE, with extremely few exceptions, the health departments, hospitals, and laboratories of our fighters for life are starved. They are scandalously pinched, not only for the money to carry out already known science to guard our lives. They lack the modest sums needed to extend their fight against yet unconquered human diseases.

In the Michigan State Health Department Laboratory a powerful preventive has been used for whooping cough, chief killer among diseases of children. But for the making and distribution of this life-saving vaccine there is not the money. In other laboratories, hospitals, pathologists and surgeons—operating on the blood vessels of dogs and nervous systems of humans—are finding the cause, making a beginning at cure of high blood pressure which kills thousands of people in the prime of life. Their adventure crawls at a snail's pace. They can't buy enough dogs, or hire enough chemists, or build needed laboratories. So it is on another frontier of human conservation; from certain insanities, disabling nerve afflictions, certain heartwrecks—all sappers of our strength, destroyers of the productive power of the people. Our physicians have not the money adequately to test out the power of the new crystal-pure vitamins against these maladies.

Mobilization Plans

OUR DOCTORS, scientists, healthmen are without doubt among the first citizens of America. This we are beginning to realize; and we wish to provide them with the sinews of war their fight for our own and our children's lives demand. How, practically, do they propose to begin their program of human conservation?

The volunteer health army they are ready to mobilize

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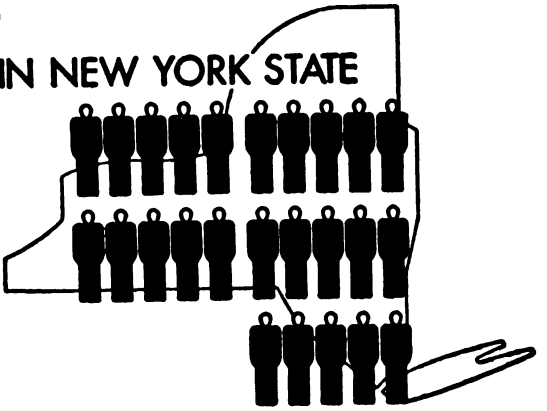
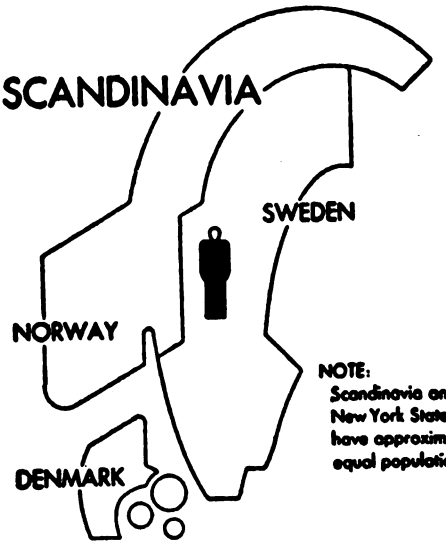
HOW A HEALTH PROGRAM WORKS



SYPHILIS IN NEW YORK STATE



SYPHILIS IN SCANDINAVIA



PICTORIAL STATISTICS INC

Each symbol represents 2000 new cases annually

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will cover every community in the country. It will be under strict local control, state supervision, and federal advisory leadership. The United States Public Health Service will expand its advisory expert services. It will equalize the financial grants-in-aid to the states, to each according to its needs, to each according to its immediate preparedness to organize its own human conservation. Each health program will be planned by the State Health Department, co-working with the State Medical Society. The front-line fight for our health and lives will be entrusted by the states to local authorities, provided these are competent; and they will co-work with physicians of the County Medical Societies.

This human conservation program does not involve socializing our doctors. What is called for is not socialized medicine, but good medicine, modern medicine, available medicine, in every far-flung community, practiced in the American way.

But let us face it: The new discipline, the scientific training of the volunteer soldiers, the physicians who with our healthmen and laboratory promise us the elimination of preventable sickness—that discipline is going to be a stern one. The fight demands a highly trained army of doctors, scientists, with new skill to use the delicate tests to diagnose, the powerful but two-edged weapons that can control, or cut down, or wipe out, the death rates from pneumonia, syphilis, malaria, cancer, maternal and child mortality. These scientific tools have most of them only come into being in the past dozen years, and many of them in less.

Trained Men Needed

To ASK your average, rank-and-file doctor, out of school for a dozen years, to use these tools without training, would be as foolish as to man modern anti-aircraft rapid-fire cannon with

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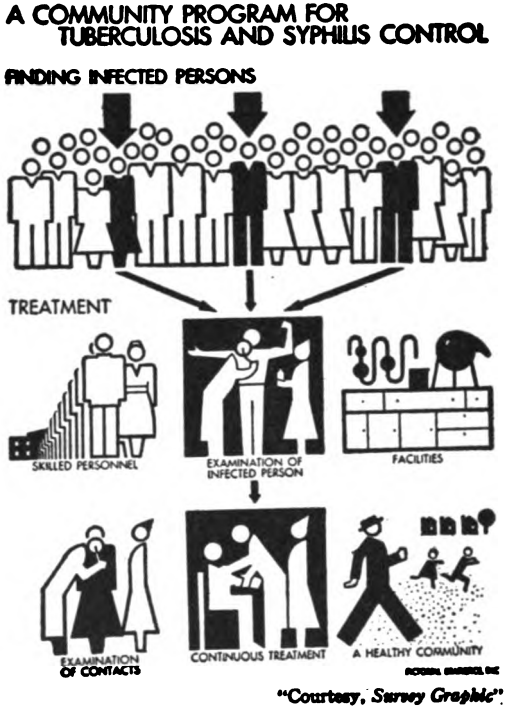
minutemen of '76 who had blazed away with nothing more modern than a muzzle-loading musket.

Let us admit this: The army of our doctors who will volunteer for the health fight, have got to be compensated for the time they take off from their practices to learn the impor-



"Courtesy, *Survey Graphic*".

tance, if not the use, of these new skills. Modern preventive medicine is no pill-peddling, horse-and-buggy, let-us-see-your-tongue, business. The laboratory is the heart of the modern fight against human erosion. The importance of the daily, the incessant use of the laboratory will be brought to all volunteering doctors and the doctors must learn what goes on against death in these new laboratories. And, volunteering,

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our doctors should be paid for their time spent as front-line soldiers in spotting preventable ills of the people, and in helping to cure and wipe them out.

When physicians are grounded in the life-guarding power of delicate blood examinations, X-rays, vaccines, serums, chemicals, then the conservation program must be so set up that all the patients of every volunteering doctor will have full use of this powerful laboratory science.

This should be true regardless of the amount of money in the pockets of any American man, woman, or child. If the patient has ample money, then of course he should pay his doctor. That should be private business between patient and doctor, patient and laboratory. It is no hard job to spot chiselers who are, anyway, few among our American people. But for all those who cannot pay, the physician cannot be expected to be a soldier in this death fight for fun or for charity. This fact must not be forgotten: It is not the doctor's bill that is the big cost in the fight against preventable sickness and death, it is the laboratory and hospital services that are the overwhelming burden, for individuals, and for our people as a nation.

Just as it would be foolish to send an army to war without modern weapons, so it would be foolish to expect our human conservation fight to be started without ample technical equipment, laboratories, hospitals. Such lacks are already mapped, and a careful building program for health centers and hospitals—expense of which is to be shared by localities, states, and federal government—is an absolutely essential preliminary to our proposed mass fight against human erosion. T B sanatoriums, mental hospitals, general hospitals, and cancer centers have got to be built at strategic points wherever there is need for them.

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The Health Centers

BUT THE real strongholds in the battle zone of the new fight for life must be the laboratory health centers. These are grievously lacking almost everywhere, but especially in those vast country areas where the practice of preventive and curative medicine has now hardly got past the Middle Ages. Each of these health centers will house a modern laboratory, manned by trained laboratory workers, pathologists, chemists, X-ray men. These will serve the community's volunteering doctors, giving them the science to spot, to fight all preventable death, from the bleeding of a new-born babe to the early cancer of old men and women. Here will be X-ray apparatus, iron lungs, blood-grouping and blood transfusion machinery, oxygen tents, electrocardiographs, metabolism machines, some stationary, others which can be carried to farm homes. Here will be medical and health consultants to cowork with family physicians. And libraries where doctors can keep ābreast of modern death-fighting science.

Finally, these health centers must be life-saving lighthouses for the people, must be rallying points, meeting places for parents, young people, children. Here by lectures, movies, our doctors can tell us the stirring story of how science can now build our strength. And, just as doctors will be health teachers of the people, so the people can teach their own needs to healthmen and doctors.

For our medical and health authorities, believe me, enormously underestimate the intelligence of the people. Figure to yourself such a people's forum in one of the new health centers, with farmers, farm wives, businessmen, workers asking their doctors: Why don't you X-ray the whole community to spot all early tuberculosis? Why doesn't everybody in our county, preachers included, get blood tests for syphilis? Why isn't our county laboratory worker investigating this new

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horse sickness, it may be encephalitis, it may jump to our children? What's wrong with your new whooping-cough vaccine, it has made Mrs. Smith's baby mighty sick! Our county has had six maternal deaths this year, how come? For pneumonia, why aren't you using the new rabbit serum, we hear it is a great improvement over horse serum?

It is to the people our new army of human conservation is responsible. The health army will be exactly as competent as its boss, the people, demand that it be.

HEALTH—A PROFITABLE INVESTMENT

THERE IS NO question that the American people are in advance of their political leaders. The people want to be strong. The people do not want to die. The federal, state, municipal, and county healthmen are eager to begin the battle. The American Medical Association, speaking for the nation's doctors, has promised its whole-hearted cooperation. But the great campaign for human conservation cannot begin without the help, yes, the leadership of another expert group of citizens.

These are the financiers, the bankers, whose job it is to audit, to account for, to conserve our nation's money wealth. It is the financier alone who can lead our health army into action. It is the banker only who knows how to draw up a great new balance sheet—to show how the red ink of our present human erosion can be changed to the black ink, the enormously profitable money investment of adequate nationwide, human conservation.

A New Role for Bankers

OUR BANKERS, in their new death-fighting role, can point out

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the terrific cost, the scandalous wastefulness, the burden on every taxpayer—of allowing this mass human erosion to continue.

Our financiers can show our political spenders, the keepers of our national purse strings, our treasury's watchdogs, how in two years the disease, dementia praecox, alone costs us more hard cash to maintain than it cost to build the Panama Canal!

Before our legislators who now demand economy, our death-fighting money men can put the true figures of the hundreds of millions of dollars squandered annually merely to maintain tuberculosis, of other hundreds of millions wasted to keep up the foul national blood taint of syphilis. They can set out the gigantic deficit due to mass sickness, death, deterioration, which runs to at least ten billion dollars yearly.

In their new role of health economists, our financial men can show our legislators and political leaders how short-sighted, how hare-brained it is to object to providing adequate sinews of war for human conservation, on the ground that vast sums now have to be spent for "social security."

Because a powerful program of human conservation—begun now—will save incalculable sums that we now spend, and vaster sums that we are going to have to waste to keep half-alive millions of citizens who are not the sound, resourceful, energetic, fighting human animals that science now can make of them.

Here is a chief cause of social insecurity; millions of our people today, needlessly deteriorated and feeble in energy, cannot weather the economic storms they would laugh at if they were truly healthy and strong.

Our bankers will admit that undoubtedly the poverty of our out-of-joint economic system helps to cause half-living human bodies, feeble brains and hands.

Then at last to the old objection, which will without

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doubt be voiced by our political budget-balancers to our bankers—"Where will we get the money?"—our financial men will make ready answer, sound, and accurate.

For our healthmen are ready to furnish their financial co-fighters the estimates of the funds that will be necessary—shared by local, state, and federal governments—to provide adequate sinews of war to cut down drastically the enormous financial drain of disease and death on our taxpayers. In cold figures our bankers can show our politicians how our national human erosion, how our national bad health is bad business.

By using only the science our healthmen and doctors already know, we can begin *now* to cut down the dollar losses resulting from fathers of families choking to death from consumption, and of mothers dying or lifewrecked by the fearful agony of childbed fever. The money-saving effected by keeping our citizens from spending lives as unproductive, tragic, subhuman vegetables in asylums, would begin within a couple of years. The accumulated saving of dollars now frittered away to maintain the madness, blindness, heartwreck, the pitiful deterioration of syphilis would within five years begin to be a good-sized credit in our national bookkeeping.

Health and National Defense

OUR POLITICIANS may make one final objection to beginning a truly powerful program of human conservation now. They may tell our financiers that war dogs are loose in the world, that we must spend billions to guard our borders. To this our new health economists, our bankers, can give a crushing answer:

What competent general staff, what sane nation, would think of choosing between money for national defense and money to build the strength of the national defenders? How effective will our airplanes, battleships, tanks, and batteries

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be, if we man them with half-alive Americans? Instead of the neglected orphan that it now is, public health should be the first line of national defense.

Death does not wait. The hour has struck for the people, their healthmen, physicians, and scientists to appeal to the nation's financial leaders to ask for the immediate beginning of a nationwide fight for human energy, human life, based on one consideration only. Based on economy.

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FOR FURTHER READING

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