are laid down in principle without prescribing a specific plan. Obviously provision must be made for adequate professional personnel. At present there would appear to be approximately enough physicians and private duty nurses to care for the country's need. Some 3 times as many public health nurses as are now available are indicated while the number of dentists could well be doubled without reaching the saturation point.

Hospitals are inadequate both as to number and equipment. It is estimated that 400,000 beds should be added to the 1,100,000 now available.

The critical aspect of the problem, however, lies in the matter of an even distribution of services considering the country as a whole. Physicians show an urban concentration. Rural areas are more in need of dentists and private duty nurses than are cities. But the rural lack of public health nursing reaches a point of scandal in certain localities. In addition to the personal preferences of professional men and women there is a vast economic problem to be met if equal opportunities for medical care are to be supplied all parts of this country. Some plan of subsidy through local taxes, insurance, government grants-in-aid, or a combination of all three, appears clearly indicated.

The committee recognizes that we have at our command tried and tested methods which if put fully to use could accomplish vastly more in the prevention of suffering and the conservation of health. Progress is discouragingly slow under present methods and policies. Better organization of existing resources and further additions to supply evident deficiencies are recommended. "The committee finds there is need and occasion now for the development of a national health program."

The Technical Committee on Medical Care has presented a masterly condensation of the vast store of information on the subject resulting from recent surveys. This has been brought into reasonable and readable form. Conclusions are implied rather than stressed. It leaves no doubt in the mind that the status quo is unsatisfactory. It proposes no revolutionary policy. On the other hand its method is to appraise fairly the merits of procedures now in operation, and at the same time to point out their inadequacies. It advocates essentially the balancing of resources now available by supplying deficiencies where the need is apparent in the various aspects of medical care. It sets forth the highly reasonable doctrine that coördination of these resources is an essential element in their successful employment.

"IT CAN'T BE DONE UNDER OUR LAW"

The procedure of health administration is to a considerable extent dictated by the law. The legal prescriptions are desirable to the extent that they are necessary for the sake of insuring coöperation of the citizen on one hand, and of protecting him against bureaucratic oppression on the other. But many procedures have been incorporated into the public health law which should have been left to the common sense of the health administrator, or to a small body of qualified persons included in a board of health or an advisory council.

Many of these laws which were thoroughly consistent with the public knowledge of their day, have subsequently become antiquated in that they place unnecessary burdens upon the public, or dictate unnecessary procedures for the health administrator. Some officials, who would like to modernize these laws, hesitate to go before the legislature because, in the endeavor to secure repeal of
obsolete provisions, they run the risk of subjecting the essential provisions to tampering, as has happened in more than one instance.

Among the more antiquated laws are those relating to vital statistics. The model vital statistics law which was drawn up about 1908 performed a very useful function, but it has now become obsolete in a number of respects; and in most of the states, the vital statistics codes today operate as a serious barrier to progress. Any proposal to improve the vital statistics procedure is exceedingly likely to evoke from a number of registrars a statement to the effect that: "Our state could not cooperate in this movement; it is contrary to our state law." And with many, the matter ends there. This mental attitude is unfortunate, and is frequently unjustifiable.

It is, of course, frequently true that in some states the legislative barriers may be insuperable in a practical sense. The attitude of registrars toward their laws, however, is often unnecessarily fatalistic, and the primary purpose of this editorial is to emphasize that the law is not always as rigid as the registrar imagines, and that it should never be assumed that a desirable step cannot be undertaken until the law has been examined in a constructive attitude. This attitude is reflected by the question "Under what provisions of the law might the proposed procedure possibly be permitted?" as opposed to the question "What does the law forbid?"

If the law be approached in this attitude, it is really remarkable how much can be done, even with an antiquated law. As an example let us take the proposal recently approved by the Association of State Registration Executives that burial permits issued in one state be accepted by cemetery authorities in other states (whence the permit would be relayed for the record and information of the local registrar). Under many of the vital statistics laws, this procedure might be contested on the ground that the state law provides that no body shall be buried within the state unless a proper death certificate has been deposited, and a burial permit obtained. Under a narrow interpretation of the law, the acceptance of foreign burial permits might be barred; but under a liberal one it probably would not. Moreover, there is frequently a provision that the state board of health shall have authority to regulate the transportation of bodies, and under this provision a favorable regulation might be made by the State Board of Health.

Again, in one state the law forbids the issuance of information from birth or death records by the county health officer to persons not authorized. But it was found possible to give out simple age statements on the ground that these did not give out new information, but merely confirmed the statement given by the applicant in his request.

If appeal is made to an attorney-general in such matters, the outcome will depend to a very considerable extent upon the manner in which the question is phrased. A bald request for a decision as to the legality of the proposed move may very readily result in a negative ruling. If, on the other hand, it is pointed out that the proposed move would be for the general welfare, that there is general support and no visible opposition, and if the references to the law include the favorable sections, the Attorney-General will usually be found willing, in his ruling, to give the benefit of any doubt to the progressive cause. This is entirely ethical and proper. No group of legislators can possibly frame a law which foresees all contingencies and social changes, and it is certainly unsound for any public servant to interpret doubtful points in the law to the detriment of the public, whose welfare the law is intended to serve.
A revision of the vital statistics laws of our states is certainly in order. The president of the American Association of State Registration Executives has initiated steps toward reorganizing the model law, but reform will probably be a slow process. In the meantime, before it is concluded that "It can't be done under our law," an effort should be made to see whether the impossibility claimed is as real as it seems.

THE SO-CALLED HUMANE POUND LAW IN CALIFORNIA

There is no such thing as a local antivivisection fight, though such movements are staged locally in the various legislatures of the country. One fight is going on now in Washington, D. C., which legally affects only the District of Columbia. What seems to be a more important movement is going on in California in what is called the Humane Pound Law. In 1922, the antivivisectionists carried on a big fight, since which time they have been fairly quiet. The recent movement, beginning in 1937, has been carried out under the initiative which the California law provides. A petition has been circulated which has received the necessary number of signatures, and the matter will go before the voters on the 1938 ballot. While the law provides that dogs and cats shall not be delivered to medical schools from public pounds, it is perfectly plain that this would greatly cripple the use of animals in experimental medicine. The election will not take place until November 8, 1938, but it is not too soon for those interested in scientific medicine to take steps to frustrate the ends of these misled people.

Fortunately, in 1915, the California Society for the Promotion of Medical Research was organized and was the leader in the successful campaign against the "antis" in 1922. It has again entered the field and will doubtless do effective work. We cannot do better than to quote here a resolution adopted by the Western Society of Naturalists:

Resolution adopted, at the request of the California Society for the Promotion of Medical Research, by:

"The Western Society of Naturalists, meeting in Berkeley, California, December 28, 29 and 30, 1937, records its emphatic opposition to any measure such as the proposed 'State Humane Pound Law' which will hinder or curtail animal experimentation as conducted by those fully qualified in biology and medicine. It is the belief of this Society that the present level of health and humane protection of man and animals and further advance in our knowledge of the phenomena of life can be maintained only by constant vigilance and by continued study of the nature of vital processes through the experimental investigation of living animals. Every effort should be made to provide the necessary animals for scientific studies rather than to interfere by the passage of hampering legislation."

While the American Public Health Association as such has not taken any steps in this matter, there is no question that we can assure the California people we are with them heart and soul, and will support them to the best of our ability.

"NINETEEN THIRTY-SEVEN A STAR HEALTH YEAR"

Two heartening reports have already been made this year. The first is from a selected group of 17,700,000 industrial policy holders for the year 1937. The second covers reports from 39 states of the Union and Hawaii for the first 9 months of 1937. One would expect the selected group of policy