

COURTESY AND VERACITY

NOW that we are cooperatively engaged in international health work, it seems particularly important that we should avoid undue boasting as to our own achievements, which, if reiterated, may seriously offend the sensibilities of other nations. It is also rather important that, if we do boast, the boasting should be based on facts.

We often hear the statement made by Americans that "we are the healthiest nation in the world"! This is, unfortunately, not so.

The only generally available measure of "healthiness" which is available on a statistical basis is the death rate. The latest comparative figures available (in most instances for 1952, but in two instances for 1951) show a death rate of 9.6 for the United States. Omitting certain very small nations and those whose statistics may be of doubtful value, there are at least four nations with records substantially better than ours. They are: Canada (9.0), Denmark (8.8), Norway (8.3), and the Netherlands (7.3). The record of Denmark, Norway, and the Netherlands is truly remarkable. To know "how they get that way" one should read the response of Dr. J. Frandsen, director-general of the Danish National Health Service, on the occasion of his well deserved receipt of the Leon Bernard Foundation Award of the World Health Organization.¹ In this address he cites the tuberculosis death rate as 11 per 100,000, as compared with ours of 16. We have much to learn from our friends in northwestern Europe.

¹ *Chronicle WHO*. 7:179 (July-Aug., Special Number), 1953.

CUTTING OUT THE MARINE HOSPITALS?

THE newspapers have given little attention to a proposal that the hospitals administered by the Public Health Service should be discontinued. As everyone interested in public health knows, hospital service for merchant seamen, beginning in 1798, was one of the first medical activities undertaken by our national government. It seems that as a possible economy measure the Department of Health, Education and Welfare was asked last spring by the Budget Bureau to give study and consideration to whether this branch of the department's activities could not be terminated.

Merchant seamen now constitute about half of the patients of the "Marine Hospitals." Legal authority has been given to care for certain other categories of persons. What would happen to the 6,000 persons who, on the average day last year, occupied beds in the 16 marine hospitals, widely distributed throughout the country, chiefly near major ports of entry? The question of providing service to these persons in other federal hospitals, or in civilian hospitals, is one of the issues involved. Most of the newspaper discussion thus far has turned on this point.

There is another issue to which public health people especially must give thought. In the distinguished history of the Public Health Service, marine hospitals have provided the chief "port of entry" for physicians into the Public Health Service itself. The undergraduate training of the physician is for clinical work; the average internship confirms this emphasis. Few young medical men in general hospitals of the country acquire any background which would lead them to be