

DEATH RATE IN 1933 WILL HIT ALL TIME LOW

Diseases of Youth Decline But Degenerative Ills On Increase.

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NEW YORK, Dec. 28.—A year ago I predicted that 1933 would in all probability be a good health year. In spite of a widespread influenza epidemic in the first quarter of the year, and of the continuation of the business depression, the year has closed with what is probably the best health record of all times. The mortality figures for the population of the country as a whole are still incomplete, but such as are available indicate that the death rate has fallen again from the low of the year before.

The records of the insurance companies which are kept currently and which cover a large fraction of the total population, are likewise very promising that a new minimum has been recorded. What are the prospects that 1934 will be equally or even better for the public health? Much, of course, depends upon our good fortune as to epidemics. No one can ever be certain about outbreaks of influenza. A severe epidemic of this condition would be immediately reflected in many deaths and would reverse the general trend.

No Flu Outbreak Expected

But based on what has occurred in the past, the chances are that we shall not suffer an influenza epidemic of any proportions in 1934. Outbreaks of this disease have shown a certain degree of periodicity, the high spots appearing every third year. The last occurrence of influenza on a large scale appeared late in 1932 and in early 1933. While it would be hazardous to draw sweeping conclusions from past occurrences, it is our judgment that we shall not have a widespread major outbreak of influenza in 1934.

The other preventable diseases are giving less and less trouble. Such conditions as typhoid fever, diphtheria and the other communicable diseases of childhood are no longer important causes of sickness and death. The chances are altogether against their having a serious effect on the health picture next year or any other year. Control over them is increasing and is becoming more and more effective.

White Plague Declining

Likewise tuberculosis should continue to decline as a major cause of sickness and of death. Twelve years ago, I hazarded the prediction that tuberculosis mortality would decline steadily and that by 1940, the rate would reach forty deaths per 100,000 of population. Many thought that I was over-optimistic because the rate was then close to 100 per 100,000. Nevertheless each year since has shown that my assumption is being realized. In 1934, the rate should be somewhere around fifty-four per 100,000 and the chances are now better than ever that the figure for 1940 will be below rather than above 40.

It should surprise no one that under conditions of lower mortality from the communicable diseases of early life there should be increased mortality from the diseases of late middle life and old age. I can see little prospect of any improvement during 1934 in the mortality rates for diabetes, cancer and heart disease. They have been taking a heavier toll year after year. Perhaps that is, after all, as it should be; and unless we discover ways of stretching the life span (and I consider this very improbable) more and more people will pass out by way of the degenerative diseases of advanced life.

Auto Deaths Increase

But in speculating about the public safety developments of 1934, it must be realized that the "happy days," if not actually "here again," are in near prospect. During the depression the death rate was lower than in prosperity. What is likely to be the effect of the better times that are coming on health? In the first place, we will probably have more deaths from accidents. As more people are re-employed, more will be subject to the hazards of industry. Then, there may be more automobile fatalities. This, in fact, was one of the very first developments we observed among Metropolitan policy holders immediately following the decided upturn in employment which took place during 1933. This rise in automobile deaths was, in a way, almost inevitable. There was more traffic—both pleasure and business—and there were more chances for accidents.

As for deaths from disease, there are many considerations. There have been persons who have actually benefited by forced restriction in their diets. Will they now suffer from the lifting of this restriction? Will those who have enjoyed more

SLAIN IN CHURCH



A knife thrust from a pew ended the life of Archbishop Leon Elisee Tourian, 50, head of the Armenian National Apostolic church in the Americas, above, as he walked down the aisle of his church in New York to open services. Several arrests were made. Police believe the crime climaxed conflict in the church over the archbishop's reported sympathy for the Russian Soviet regime.

sunshine and more leisure suffer impaired health when these luxuries of the depression are curtailed? I doubt it.

The weather conditions during any year are always to be reckoned with; and we can not tell what they will be during 1934.

But, to my mind, the most important controllable force making for a good health year is the work of the health services and of the social agencies. Health workers would look forward to 1934 with greater courage and hope if they could know that their services are to be backed by adequate budgets; that health laboratories will not suffer; that public health nursing will not be curtailed; that much needed effort in industrial, social and child hygiene, municipal sanitation, milk inspection, supervision of food and drugs, public health engineering, vital statistics, and public health education, will be supported and not crippled because of inadequate appropriations.

It has been through the splendid work of such agencies, as well as the organization of relief work in general, that the effects of unemployment upon the health of families have been diverted or at least retarded during the years of the depression. It is for these reasons that the health services, both public and private, should be given all possible support that they may continue their effective protection of the most valued asset we have, namely, life and health.

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