



## **NINETY YEARS AGO, FEBRUARY, 1922**

Jay Perkins, MD, discusses the various features and manifestations of asthma, examining a number of cases, and particularly looks at thyroid dysfunction with special reference to asthma. Not all cases can be explained in relation to the endocrine glands--possibly due to incomplete knowledge, or lack of demonstrated relation. He notes that in cases in which asthma has been present for a long time, other functions become impaired and the original cause of the asthma disappears as glands atrophy with increasing age.

Roy Blosser, MD, looks at pruritus as both a symptom in many skin diseases, as something independent of lesions, as a symptom of internal disease, and as a condition without apparent cause. He briefly discusses generalized pruritus as well as pruritis of the face and genital region. Recommended treatment is typically gentle washing and lotions with an avoidance of wool clothing and too-frequent bathing. When all else fails, x-ray treatment is an assured treatment method, but one best employed by those with knowledge of the technique.

An editorial notes historical documents which reveal one Benjamin Marten, MD, of Holbourn in 1719 presenting a work entitled "New Theory of Consumptions: more especially of a Phthisis or Consumption of the Lungs, where ... Enquiry is made concerning the Prime, Essential and hitherto accounted Inexplicable Cause of that Disease, so very Endemick to this Nation, ..." in which he propounds an early germ theory applicable to not only tuberculosis, but also syphilis, rheumatism, smallpox, leprosy, plague, measles, and common colds. The author notes the modern ring of Dr. Marten's argument for a theory not proven until 1882.

Another editorial observes treatments among ancient works of medicine by Hippocrates up to Jenner in the late eighteenth century which suggest the informed use of antitoxins.

## **FIFTY YEARS AGO, FEBRUARY, 1962**

The application of closed chest cardiac massage is introduced by Robert L. Curran, MD, Joseph R. Gaeta, MD, Frank Merlino, MD, and Lester L. Vargas, MD. The procedure described would be familiar to modern readers as a form of CPR in which rhythmic pressure is applied to the appropriate area over the ribs paired with simultaneous ventilation with the aim of improving oxygenated blood flow. While not a guarantee, it has advantages in speed of application. There exist potential complications in the form of fractured ribs and laceration of the abdominal viscera, but complications should be reduced as experience increases.

This issue includes the second of a two-part analysis by the Reverend Stanley Parry, CSC, PhD, of the University of Notre Dame regarding the King-Anderson Bill (H.R. 4222) brought before Congress addressing financing certain limited medical

care for the aged through Social Security. The author suggests that if the medically indigent could purchase health care insurance, insurance companies would have long ago sold it to them. Consequently, H.R. 422 would not qualify for the traditional meaning of the term "insurance." He concludes: "Ours indeed is an age of crisis. And there is in our times a deep source of insecurity. But that source is not economic. And no amount of state-supplied economic security will ever relieve the anxiety our people are trained to by public policy based on pessimism and rooted in the assumption that times are bad and getting worse. Never before in the history of man has a nation been at once so young, so strong and so fearful. H. R. 4222 offers an opportunity to increase that fear or to begin its conquest."

## **TWENTY-FIVE YEARS AGO, FEBRUARY, 1987**

Robert W. Kates, PhD, talks about the program at Brown University to address world hunger problems of the present and future. He finds the current methods of measuring world hunger as unsatisfactory and introduces alternative definitions and taxonomies to be applied to the question. He also stresses the need for knowledge on the history of hunger, the factors involved, and what is to be learned from that. He notes the complexity of the issues, its varying factors and influences, but remains optimistic that persistence will win out.

Louise Aronson, BA, discusses, in detail, traditional Cambodian health beliefs and practice with the purpose of understanding Cambodian traditions in facilitating their care in a Western setting. Traditional Cambodian perceptions of illness and treatment practices are part of an ancient and complex medical system. American health care givers can do much to improve the appropriateness of health care for refugees if they have some understanding of the refugee mindset and expectations. The author concludes with the suggestion that acknowledgement of their medical system by Americans would contribute much toward Cambodian acceptance of American medicine.

H. Denman Scott, MD, Director of the Rhode Island Department of Health, gives an overview of health care from 1986-1987 in a paper subtitled "It Was the Best of Times, It Was the Worst of Times." He covers declining death rates, improvements in medical equipment and diagnostic techniques, but also takes a long look at the AIDS epidemic and how the disease burden has changed in which many health problems have no immediate prospects for biomedical solution or amelioration. He goes on to discuss ethical dilemmas in life support issues, affordability of health care costs, competition, and a sense of overall stress in the medical profession. Tried and true conservative practices will clash with new practices. Which will maintain? With care, progress will be slow, but sure.