Migrant workers

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SYNOPSES

FERGUSON, FREDERICK F. (Puerto Rico Field Station, Communicable Disease Center, Public Health Service), RICHARDS, CHARLES S., and PALMER, JUAN R.: *Control of Australorbis glabratus by acrolein in Puerto Rico. Public Health Reports, Vol. 76, June 1961, pp. 461–468.*

Experimental studies in Puerto Rico with acrolein have shown that this herbicide offers considerable promise as a molluscicide against *Australorbis glabratus*, the intermediate host of *Schistosoma mansoni*.

Investigations in irrigation canals and ponds demonstrated that acrolein is a potent destroyer of both underwater weeds and *A. glabratus*. Submersed vegetation and snails were eliminated at distances up to 20 miles from the point of application in evenly flowing water.

Acrolein can be applied directly to streams or ponds at points of turbulence, or it can be mixed well with stream water by the action of a circulating pump. Laboratory tests indicated that 10 ppm is required for effective kill of *A. glabratus*. However, in one field trial a concentration of 3 ppm gave effective kill. Acrolein is toxic to fish in treated ponds and canals. At the proper herbicidal-molluscicidal dosages, the compound can be used without hazard to mammals drinking or contacting treated water. Since acrolein irritates the nose and eyes in atmospheric concentrations as low as 0.5 ppm, it acts as its own warning device.

LUCAS, LEON (Wayne State University, Detroit, Mich.): *The Detroit group social activity for convalescing mental patients. Public Health Reports, Vol. 76, June 1961, pp. 475–480.*

Convalescing mental patients need assistance in their social reintegration into life in the community. Social activity groups, such as ex-patient clubs, offer an opportunity for these patients to participate in group activities. Gains in self-assurance and in confidence in social situations are an important aspect of this process of readjustment and readaptation.

A demonstration project was set up and was in operation for 162 weeks, slightly more than 3 years (1954–57). The 96 patients who participated in the weekly sessions were referred by many community and private sources.

A desire for social contact in larger rather than in smaller groups and in activities requiring more social intermingling was expressed by the majority of the members participating in the group sessions. The need for such groups was attested to by the referral sources. No conclusive results in relation to the health status of the members were obtained.

SHAPIRO, SAM (Health Insurance Plan of Greater New York), and BARON, SEYMOUR H.: *Prescriptions for psychotropic drugs in a noninstitutional population. Public Health Reports, Vol. 76, June 1961, pp. 481–488.*

The study provides information on the prescribing of psychotropic drugs for a population enrolled in HIP, as they are seen by physicians in the home or office. About 12 percent of all prescriptions written during the week of April 7–13, 1959, were for this class of drugs. About half of the psychotropic drugs were tranquilizers, a fifth were antidepressives, and the remainder (29 percent) were sedative-relaxants. The annual rate of prescribing psychotropic drugs was 21 per 100 persons (refills excluded).

Major age-sex differentials in rates were found. By far the lowest rate was among children (5 prescriptions per 100 under 15 years of age); the highest rate was among the aged (34 per 100 over 65 years of age). Females had more than twice as high a rate as males (27 and 12 per 100, respectively). These differentials could not be explained by variations in the rate of physician visits or in the rate at which "all drugs" were prescribed.

A large majority of the prescriptions for psychotropic drugs (82 percent) were written by family physicians. These physicians accounted for a somewhat smaller proportion of all prescriptions written during the study period. Persons receiving a prescription for a psychotropic drug were more likely to be ambulatory than those for whom prescriptions in general were being written.

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SYNOPSES

MARSHALL, JOHN D. (University of Maryland), WOLFORD, CLAIRE B., and FABER, JOHN E.: ***Characterization of A. faecalis isolated from an iodine-disinfected swimming pool. Public Health Reports, Vol. 76, June 1961, pp. 529–533.***

During an investigation of iodine-disinfected swimming pools, an organism was isolated which survived halogen concentration (0.2–0.6 ppm) lethal to the commonly used indicator organisms, coliforms, and fecal streptococci. The basic physiological characteristics of this organism most closely resemble those of the genus *Alcaligenes*. The organism was further classified as *Alcaligenes faecalis*, since its only variation from the description of *A. faecalis* in Bergey's "Manual of Determinative Bacteriology" was its ability to hydrolyze urea.

The organism was nonpathogenic, as determined by intraperitoneal and intravenous inoculation of mice and ocular instillation and intradermal inoculation of rabbits.

The halogen tolerance of the organism was determined for free chlorine, combined available chlorine, elemental iodine, and iodine as hypoiodous acid at 1-, 5-, and 10-minute intervals.

Concentrations in parts per million necessary to reduce the viable count 99.99 percent in 10 minutes were: iodine, 1.8; hypoiodous acid, 1.04; free chlorine, 0.88; and combined available chlorine, 10.37.

In view of this degree of resistance of the organism to halogen, it was felt that the presence of a high plate count in the absence of positive tests for coliform organisms or fecal streptococci held little significance as an index of sanitation of the water. Concurrent studies, to be reported elsewhere, indicate that the physical environment rather than the swimmer was the source of this organism.

BAKER, TIMOTHY D. (Johns Hopkins University School of Hygiene and Public Health), and HAFNER, WILLIAM G.: ***Cadmium poisoning from a refrigerator shelf used as an improvised barbecue grill. Public Health Reports, Vol. 76, June 1961, pp. 543–544.***

A cadmium-plated refrigerator shelf, used as a barbecue grill, apparently poisoned a family, two adults and two children, in Syracuse, N.Y. After eating steaks grilled on the shelf, all exhibited symptoms—headache, nausea, and vomiting—associated with chemical intoxication. All the patients recovered. As ingestion of cadmium rarely causes death whereas inhalation often does, it is believed the poison was ingested rather than inhaled. To the knowledge of the authors, cadmium poisoning under these circumstances has not previously been reported.

SCHOETTLIN, CHARLES E., and LANDAU, EMANUEL (Public Health Service): ***Air pollution and asthmatic attacks in the Los Angeles Area. Public Health Reports, Vol. 76, June 1961, pp. 545–548.***

A study of 137 patients with bronchial asthma who resided and worked in the Pasadena area of Los Angeles County was conducted during the fall of 1956 to determine whether variation in daily attacks of asthma was related to variation in communitywide air pollution. The patients were selected by five physicians from their practice. By means of diaries maintained for 98 days, patients recorded observations regarding (*a*) time of onset, (*b*) severity of attack, (*c*) address where attack began, and (*d*) patient's opinion as to cause of onset. Daily meteorologic and air pollution data were also obtained for this period.

Analysis of the data revealed low positive correlations between measures of air pollution and the number of patients having asthmatic attacks. However, the average number of patients afflicted on days with oxidant values above 25 pphm (when most people experience eye irritation) was significantly greater than the average number on days when oxidant values were below this level. Similarly, the number of persons having attacks on days when plants showed damage due to air pollution (a biological indicator) was significantly greater than the number on other days. Eight persons (seven of them female) were selected as those whose attacks were most frequent on days with most extensive plant damage, but no other common characteristic could be ascertained.

In this preliminary investigation, no objective measurement of clinical status was available. Future attempts to determine asthmatic response to air pollution should rely increasingly on clinical and laboratory evaluation.

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