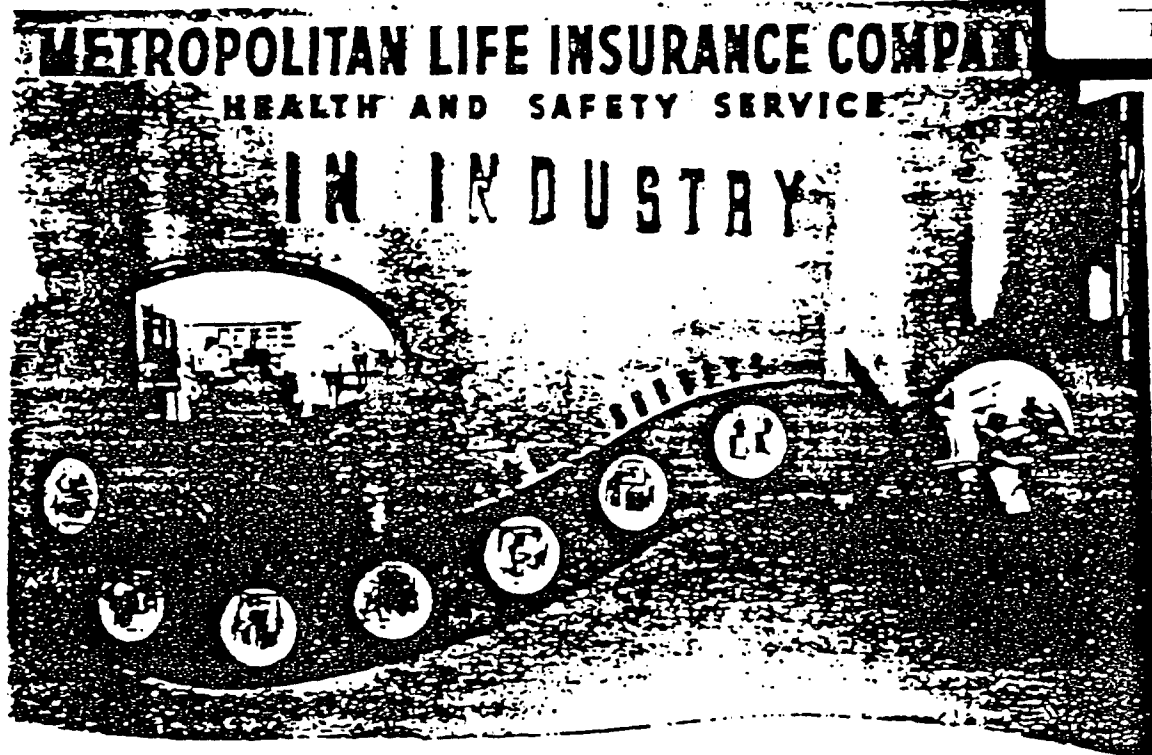


THE QUARTERLY BULLETIN

for METROPOLITAN NURSES

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PLAINTIFF'S EXHIBIT

MET-69

This new Industrial Exhibit was first shown at the American Industrial Physicians and Surgeons Annual Meeting, held at Detroit from April 2d to 8th, 1949.

The oval-shaped window on the left is a miniature replica of our Industrial Hygiene Laboratory. The seven small circular illuminated pictures, which flash on one after the other, illustrate some of the factors involved in a plant survey, namely: the plant environment, including safe physical conditions; light, temperature, humidity; fumes, gases, dust; checking radioactivity; plant nursing and medical facilities; analyses of accident facts; and evaluation of safety programs. The goal of a plant survey is shown in the large circular window at the right, which illustrates a safe and healthy worker.

Over 500 people stopped at the Metropolitan Exhibit and requested 7,942 pieces of industrial and general health and safety material. Requests were also received for statistical data and for information on several aspects of industrial relations.

PLAINTIFF'S
EXHIBIT

ML-5273

NURSING BUREAU • HEALTH and WELFARE DIVISION

METROPOLITAN LIFE INSURANCE COMPANY

PRODUCED S/C/M/MS

2507

THE SOCIAL AND BIOLOGICAL CHALLENGE OF
THE AGING POPULATION
By Margaret Reid, Educational Director

This spring, at the New York Academy of Medicine, many medical and health workers from nearby States attended a two-day health education conference. An annual affair, this year's conference was unusually stimulating. The speakers were all authorities in their fields and for the most part, were orators--or near orators! Attention was rapt and the response of the members was most enthusiastic.

We like to think that the program was so well conceived and executed because our own Dr. Armstrong chaired the committee which planned it.

The program read like a "who's who" and included such men as Jean R. Oliver, M.D., of the Long Island College of Medicine; V.G. Valaoras, M.D., The United Nations, Population Division; the late Frederick F. Tisdall, M.D., Toronto Hospital for Sick Children, Canada; David Seegal, M.D., Director of Medical Services, Maimonides Hospital of Brooklyn; Edward B. Allen, M.D., Psychiatrist, Westchester Division, New York Hospital; Edward J. Stieglitz, M.D., Internist, Washington, D.C.; Eduard C. Lindeman, LL. D., New York School of Social Work; Kingsley Davis, Ph. D., Associate Professor, Department of Sociology, Columbia University; Julius Hochman, Vice-President, International Ladies Garment Workers' Union; Dr. V. Korenchevsky, Head of the Oxford Gerontological Research Unit, Oxford University, England; and Houston Peterson, Ph.D., Professor of Philosophy, Rutgers University. Practically all aspects of the aging problem were discussed at the conference. A brief resume follows.

The Biology of Aging

The structure of the single cell of the newborn and even of the embryo is similar in every respect to that of the single cell of the aged person. It is only when cells combine to function as an organ that changes take place. These are due to accidents, in-

fections, nutritional disturbances, and general wear and tear. There is no "elixir of youth." Senescence begins when life begins.

Controllable Factors in the Aging Process

The function of geriatrics is to increase the life span between disease, disability, and disaster. Delaying the undesirable effects of senescence seems to be largely a matter of controlling infections, chronic illnesses, and nutritional disturbances.

Children and young men and women suffering from severe malnutrition display many of the characteristics of the aged and senescent person. Hypertension is not infrequent at the age of 20 and has been known to exist at the early age of 10. Symptoms of arteriosclerosis are not infrequently found in persons 20 years of age.

The approach to the prevention of chronic illness is twofold. First, control the agents of disease and influence host resistance. For example, if hemolytic streptococcal infections were to be prevented in persons susceptible to rheumatic fever, rheumatic heart disease would soon be wiped out as a serious problem. Second, detect disease early and immediately start giving care to patients with chronic illness. The periodic physical examination, providing accurate, sound, early diagnosis, is essential to any program to prevent chronic illness.

Long-term or chronic illnesses may be classified as those that are largely controlled; those that are partially controlled; and, those which, at the present time, are uncontrolled. As Dr. Seegal listed various diseases under these categories, one felt very optimistic about the problem of long-term illnesses. In the list of largely controlled illnesses are diabetes mellitus, hyperthyroidism, sprue, pellagra, scurvy, thrombocytopenic purpura, familial hemolytic

jaundice, syphilis, hookworm, and amebiasis. Examples of partially controlled illnesses include diabetes insipidus, Addison's Disease, celiac disease, hemophilia, pulmonary tuberculosis, osteomyelitis, and such miscellaneous diseases as chronic lead poisoning, rheumatoid arthritis, and thrombo angitis obliterans. Before long, research may give us at least partial control over many other chronic illnesses which now seem uncontrollable - such as arteriosclerosis, leukemia, and multiple sclerosis.

The very young and the very old have similar characteristics; both are insecure; both depend upon faith and do not like to formulate objectives for themselves. A well-balanced emotional life helps to delay some of the undesirable and unwanted difficulties attending the aging process. Maturity of emotions is synonymous with an appreciation of real values in life. Slavish adherence to conventionality is a sign of immaturity. Motivation is vitally important if a person is to help himself delay his senescence. Rehabilitative therapy can control the severity of many non-curable disorders. We are what we are today because of what has happened to us yesterday.

The Sociological Challenge

The awareness of uselessness is the tragedy of old age. Many of the aged feel that they have lost status, affection, and honor in their homes and in our country today. Where an attitude of neglect exists toward the older person, it may be attributed to three causes: the gross utilitarianistic philosophy permeating our country today; the extreme value placed upon, and the worship given, youth; and the lack of feeling for tradition.

Prolonging the usefulness of the aging person is an essential factor in delaying senescence. Society must plan to use the knowledge, skills, and wisdom of the person retired from employment; for example, retired professors can serve as itinerant teachers, advise seminar groups of students and young

professors, provide consultation services on a small fee basis to colleges and schools, and participate in an expanded movement of adult education. The community needs to organize for more than just the physical comforts and economic needs of older people.

One left the conference realizing with Dr. Stieglitz that "the only approach to the problems of the aging is the multiple approach." The biologist, the population expert, the general practitioner and internist, the sociologist, the union leader, the social worker, the health educator, and the nurse, each in his or her field, applying research methods, and working together, can help to solve the many facets of the total problem.

TERRITORIAL SUPERVISORS MEETING 1949

The Spring meeting of the Territorial Supervisors was held in the Home Office on April 20th and 21st.

Interesting statements were given by Dr. Armstrong on "Report of Health and Welfare Division;" by Dr. Dublin on "Observations on Current Public Health Conditions and Developments;" by Miss Haupt on "The Nursing Bureau," as well as a discussion of the National Nursing Structure Committee; by Mr. A.C. Siegfried, Assistant Actuary, on "Review of Current Social and Health Legislation in the 81st Congress;" by Dr. Wheatley on "Academy of Pediatrics Study of Child Health Services;" and by Miss York on "Community Activities of Metropolitan Nurses." At luncheon, Dr. Lanza discussed "Atomic Energy in Relation to Public Health and Medical Therapy."

ANNOUNCEMENTS

Miss Marie L. Johnson's title has been changed from Assistant Director to that of Associate Director of the Nursing Bureau of the Company.

Mrs. Jean Roberts' title has been changed from Territorial Supervisor to Pacific Coast Nursing Director.

GETTING ACQUAINTED WITH THE INDUSTRIAL HEALTH BUREAU

By William J. McConnell, M.D.
Assistant Medical Director



The purpose of the Company's Industrial Health Bureau is to cooperate with industry in solving health problems affecting workers. This activity was started in 1924. The ever-increasing contacts with industrial concerns among Metropolitan Group policyholders resulted in the formation in 1926 of an Industrial Hygiene Laboratory, the first of its kind ever established by an insurance company.

Booklets on such subjects as silicosis, health protection in welding, prevention of oil pimples, and many others are available on request to executives of industrial organizations.

In addition, special studies requested by Metropolitan Group-insured companies have been made on ventilation, lighting, sanitation, control of toxic dusts and gases in the plant atmosphere, protective devices in hazardous processes, the role of physical examinations in industry, effects on the workers of toxic substances encountered in plant processes, the planning of industrial plant dispensaries, and many others. Thus through exceptional library facilities and the personal experience of Staff members, supplemented by the many sources of information made available through its wide and numerous contacts with health work in industry, the Industrial Health Bureau is prepared to furnish practical assistance to Metropolitan Group-insured firms submitting problems for its consideration.

Information on general health matters may be handled through correspondence, but it is believed that better results are obtained when plant representatives make per-

sonal visits to the Bureau, where their problems can be discussed freely with the Staff and where protective devices can be demonstrated.

The physical and chemical service laboratories are well equipped to make studies in all phases of industrial hygiene. Laboratory facilities include solvent vapor measuring devices, mercury vapor detectors, sound meters to determine noise levels, Geiger counters to detect the presence of radio-active substances, carbon monoxide indicators, and velometers for measurement of air flow.

Individual plant studies are conducted for Metropolitan Group-insured firms upon the invitation, and with the full cooperation of, management. Studies are made when circumstances warrant a more detailed examination of plant working areas for the purpose of evaluating various factors affecting employee health. Definite knowledge of plant operations based on observations and laboratory analyses of environmental contaminants is obtained in this way and serves in the development of protective measures.

In addition to individual plant studies, occasional major surveys of selected industries, usually sponsored by associations representing the industry, are conducted for the purpose of determining the specific health hazards common to the industry, and of outlining effective measures for their control. An example of such a study is the report on "Health Hazards in the Foundry Industry", published in the Journal of Industrial Hygiene, July 1934. These studies represent a cross-section of the particular industries selected for study, and the participating plants are not always chosen from among our insured Groups. Such general studies are made without cost to the industry, and represent a contribution by the Company to the health of workers in industry and, therefore, to the field of public health.

23.0

MISS GUILFORD RETIRES



On April 28, 1949, after more than 24 years of Company service, Miss Elizabeth Guilford retired as Director of the Home Economics Bureau.

Miss Guilford came to the Metropolitan on September 22, 1924 to handle specialized correspondence dealing with home economics matters. In July 1934 she was named the head of the newly established Home Economics Bureau.

Miss Guilford was responsible for the conception and writing of most of the pamphlets dealing with nutrition published by the Company. She was also responsible for an active teaching program for Field Nurses through the medium of Nutrition Institutes and for a considerable volume of personal and technical advice on nutrition to policyholders and others. In addition to her Company activities, Miss Guilford gave valuable assistance to numerous outside professional organizations where she served both as an officer and a committee member.

In anticipation of her retirement, Miss Guilford aided in the selection and introduction of her successor, Miss A. June Bricker, (See the October 1948 *Quarterly Bulletin*) who became Director of the Home Economics Bureau on April 4, 1949.

Our best wishes for many happy years go with Miss Guilford on her return to her gardening interests and home in Pennsylvania.

MISS ROBERTS RETIRES

The Nursing Bureau of the Metropolitan takes pleasure in paying a warm tribute to Miss Mary Roberts, who, upon retirement May 4th as Editor-in-Chief of the *American Jour-*

nal of Nursing, has so justly earned the Mary Adelaide Nutting Nursing Award.

You will read in your professional magazines the inspiring story of her vision and leadership in nursing. We in the Metropolitan are indebted to her for her cooperation with the Health and Welfare Division as a whole, for publication of, or reference to, many of our materials. The *Quarterly Bulletin* is especially grateful to her for guidance and suggestions throughout the life of our publication.

The gratitude and best wishes of all the members of our Staff go to her as she reaps the deep satisfaction of an outstanding career.

CONGRATULATIONS

25 Years of Service

MISS ANNIE MATTHEWS was originally assigned to the Center in Danville, Va. After 18 years in this Center, she was transferred to Memphis, Tenn. Miss Matthews has the knack of adjusting well to all situations and of working harmoniously with all groups. Over the years, she has given good nursing care to policyholders. A "green thumb" has helped Miss Matthews grow beautiful flowers all year round in her garden.

MRS. CLARA NOVEY has spent 25 years with the Company in Torrington, Conn. Her patients respond well to her friendly interest and considerate care. She maintains an excellent relationship with Managers, Agents, doctors, and other health workers in the community. Mrs. Novey is well-known in her community and respected by all with whom she comes in contact.

20 Years of Service

MISS VIRGINIA SWETTENHAM. Except for six months' Staff experience in St. Louis County, Mo., Miss Swettenham has spent her entire time with the Company in Alton, Ill. She takes an active part in professional and community affairs and is highly regarded by all who have worked with her. Her patients appreciate her excellent care and teaching. Miss Swettenham has also completed the public health nursing program at George Peabody College, Nashville, Tenn.

CONFERENCE ON CANCER CONTROL
By Miss Sue Jacobs,
Staff Nurse, Paducah, Ky.



A two-day conference on cancer control was held in Paducah, Ky. last December under the auspices of the McCracken County Health Department. Public health nurses from 15 West Kentucky counties met to discuss various control measures for cancer, now the #2 cause of death in the United States.

Before the meeting opened, a true and false test of 57 questions was given to each nurse. This test was based on a reading list that had been mailed to each County Health Department before the meeting. At the opening of the meeting, Miss Elizabeth Walker, Nursing Consultant, Cancer Control Division of the United States Public Health Service, discussed and answered each question.

At this meeting, it was emphasized that cancer has developed into a definite public health problem because it kills more than 180,000 persons a year. However, it should be kept in mind that the rise in cancer mortality is due in part to reduction in deaths from other important causes; to the increase in the average age reached by Americans, and to more frequent reporting of cancer on death certificates. The public health nurse is in a strategic position to help physicians in cancer detection, treatment, and care. Familiarity with the symptoms of cancer will help her to know when to urge patients to see their physician for diagnosis.

Dr. C.J. Purdy, Riverside Hospital radiologist, said that at the present time more women between 30 and 54 years of age die of cancer than of any other disease. Stressing the possibility of curing cancer, or at least establishing a higher cure rate, Dr. Purdy listed 12 danger signals that de-

mand early examination and diagnosis:

1. Any persistent lumps or thickening, especially in the breast, lips, or tongue; about the neck, armpit, or groin.
2. Any sore that does not seem to be healing normally within 10 days, particularly about the tongue, mouth, or lips.
3. Progressive changes in color or size in a mole, wart, or birthmark.
4. Any irregular bleeding or discharge.
5. White patches inside the mouth or persistent white spots on the tongue.
6. Persistent hoarseness, unexplained coughs, or difficulty in swallowing that lasts more than two weeks.
7. Swelling or pain in a bone, especially if the pain gets worse at night.
8. Persistent and unexplained indigestion.
9. Alternating constipation and diarrhea.
10. Pain and difficulty in urinating.
11. Sudden loss of weight.
12. Unexplained feeling of fatigue.

Miss Walker discussed the history and technique of the Papanicolaou smear. The "CTC" or the Papanicolaou smear test is one of the most recent developments for early detection and diagnosis of uterine cancer. This cytologic test, when interpreted by competent, especially trained physicians and pathologists, having adequate facilities for laboratory examinations, may make earlier detection of cancer possible. Thus treatment may be begun at an earlier stage.

The test has been correct in 98 percent of the cases as checked by biopsy. This vaginal smear technique, with certain technical modifications, has also proved successful with secretions from the cervix, prostate, and lungs, and also with urine and gastric juices.

Dr. R.W. Robertson, a Paducah surgeon, discussed the medical aspects of cancer. He pounded home the theme of early diagnosis as the primary factor in controlling this dreaded malady. Dr. Robertson gave an interesting and informative talk on the treatment.

character, predisposing causes, symptoms, and prevention of cancer of the skin, mouth, breast, digestive organs, uterus, genitourinary, and respiratory organs. In discussing breast cancer, he said the important signs to watch for are:

- | | |
|-------------------------|----------------------------|
| (1) discharge | (4) dimpling |
| (2) asymmetry | (5) puckering |
| (3) difference in level | (6) orange peel appearance |

Dr. E.W. Jackson, another Paducah surgeon, spoke on the medical care of advanced cancer. He emphasized the following: Improve the patient's mental attitude; try to relieve his suffering; maintain his general health; and resort to any measure to make him more comfortable.

Mr. Charles P. Taylor, Kentucky Division of the American Cancer Control Society, spoke on the resources for cancer patients in Kentucky. There are 18 cancer clinics in Kentucky. Seventeen are equipped to diagnose and treat, and the 18th is a mobile unit, equipped only for diagnosis.

The cancer mobile unit goes into the counties only on order from the Medical Association. An educational program is conducted before the arrival of the unit. All patients must be referred by their physician. As it would be impossible to screen the public, each patient is sent in for examination of a specific part of the body. Patients who are found to require treatment are referred to the nearest clinic.

Editor's note: For a complete description of the Papanicolaou smear test, read Miss Walker's article, "Cytologic Test for Cancer," published in the American Journal of Nursing, January, 1949.

INTERPRETIVE VISITS DO PAY

The following letter was received by Mrs. Pauline Payne, Staff Nurse, Shreveport, La., after a visit to a doctor's office to interpret our Nursing Service and to obtain Maternity Standing Orders (Form No. 158-A):

Dear Mrs. Payne:

I enjoyed your visit yesterday very much and was pleasantly surprised to learn of the health activities that the Metropolitan Life Insurance Company provides for its policyholders here in this city. Enclosed is Form No. 158-A which you left with me.

I was, indeed, flattered by your request for a copy of my prenatal instructions. These are also enclosed. I want to again mention that this is not their final form. I contemplate addition of more information concerning vomiting in pregnancy, development of the foetus, an explanation of the diet, and a few words about the conduct of labor. The Metropolitan booklet you left with me will be of considerable help in preparing this material.

Hoping we will again have some patients in common, I wish to remain,

Yours sincerely,

Floyd L. Peninger, M.D.
(Thank you, Dr. Peninger!)

FROM OUR CANADIAN HEAD OFFICE

Dr. N.L. Burnette has reported that Mrs. Charles McArthur, a former nurse, died in Montreal on April 18, 1949, at the age of 95. It is believed that Mrs. McArthur may have been the last living person on this continent who knew Florence Nightingale. Mrs. McArthur trained in St. Thomas Hospital, London, at the time Florence Nightingale was the Superintendent.

MISS GERTRUDE MORRIS RESIGNS

On July 3d Miss Morris resigned from the Company after about nine years of service. Originally assigned as a Staff Nurse in Easton, Pa., Miss Morris later became Head Nurse and Local Supervisor, Queens, L.I., and a Territorial Supervisor in Southwestern and Midwestern Territories.

We all wish her success in her new position as Assistant Director and Educational Director of the Visiting Nurse Association of Omaha, Neb.

2513

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SOME STAFF ACTIVITIES

We are pleased to report that our Nurses are meeting their community responsibilities as health teachers and workers in many ways. They have been giving talks before various groups on health topics, making radio speeches, participating in institutes and health campaigns, and serving as members or officers of various agencies and associations. We are sorry that we do not have the space to record all the activities, but we know you will be interested in the following:

MISS GERTRUDE MORRIS, Territorial Supervisor, presented a paper on Contributions by Voluntary Public Health Nursing Agencies to Local Health Departments at the Seventh Annual Meeting of the Kansas Public Health Association at Pittsburg, Kans., on April 26th.

MISS MARY BRIGHTWELL, Lynchburg, Va., actively participated in an institute on rheumatic fever conducted by the Public Health Section, District No. 3, Lynchburg, on March 30th. Miss Brightwell is a member of the Advisory Board for Colored Practical Nurses for the State of Virginia; a member of the Board of Directors for District No. 3; and a member of the City Planning Committee for Community Nursing Service.

MISS OLIVE WESCOAT, Asbury Park, N.J., reports that "during the Cavalcade of Progress, I assisted with the Chest X-ray Clinic on April 4th. The clinic was held under the auspices of the New Jersey Tuberculosis Program, and in all, 2,040 X-rays were taken."

Not too many of us have had the interesting experience of talking on the radio. MISS HELEN RICHARDS, Kingston, N.Y., explained our Nursing Service on a local radio station during Kingston's "Public Health Nurse Week."

Frequently, Metropolitan Nurses have been asked to discuss the Metropolitan Life Insurance Company Nursing Service and its part in the total health of the community before various groups of student nurses in their communities. MRS. LEE FRIST, Gadsden, Ala., had the opportunity to talk with the student nurses of the Holy Name of Jesus

Hospital on this subject. MRS. NORMA McMULLEN, Tampa, Fla., also discussed this subject with the senior students at the Gordon-Keller Tampa Municipal Hospital.

MRS. DORIS WILLIAMS, Corning, N.Y., also had the opportunity to discuss our Nursing Service with the student nurses of Alfred University School of Nursing. MRS. HELEN GLOCKNER, Portsmouth, Ohio, discussed Public Health Nursing with the student nurses of Mercy Hospital.

MISS BESS MacCULLOCH, Port Jervis, N.Y., recently gave a talk on cancer to three health classes at Port Jervis High School. As a follow-up to Miss MacCulloch's talk, the students made an interesting bulletin board display, which Miss MacCulloch reports, "was the talk of the school."

We note that MRS. PHYLLIS LAYNE, Hannibal, Mo., recently gave a talk to a group of student teachers at the Hannibal LaGrange College. She discussed with them various health problems which teachers may encounter in the school room and pointed out ways to recognize these problems. The booklet, *What Teachers See*, was effectively used during this discussion. Mrs. Layne is on the Board of Directors of the Health Council. She has also been Acting President of the District Nurses Association, and is on the Board of the County Tuberculosis Association.

More and more Parent-Teacher Associations are requesting talks by our nurses on various health topics. MISS ELIZABETH PHILLIPS, Amsterdam, N.Y., recently discussed childhood diseases at a local Parent-Teacher Association meeting. MRS. BARBARA GATES, Burlington, N.J., talked on "Healthy Children for a Healthy America", at the Delanco Parent Teacher Association meeting, on April 12th. Mrs. Gates reports that other members of the panel included a superintendent of schools, a minister, and a local physician. MISS BESS MacCULLOCH, Port Jervis, N.Y., showed the film *Proof of the Pudding* to the Matamoras Parent-Teacher Association on May 10th. She also gave a brief talk on nutrition, and dis-

played literature on the subject.

The following Nurses have been elected officers of various associations: MISS VIRGINIA PATTERSON, Joplin, Mo., is president of the Fifth District Missouri State Nurses Association. MISS RUTH LEWIS, Shamokin, Pa., is on the Board of the local American Red Cross Chapter. MISS MARGARET HARRISON, Local Supervisor in Towson, Md., has been elected to serve on the Board of Directors of the Baltimore County Public Health Association.

MRS. ELIZABETH GEHRIG, Akron, Ohio, is to be commended on her work in observing and reporting an open cistern to the Health Commissioner. While visiting a patient, Mrs. Gehrig found an open cistern, 125 feet deep and filled with water, partially covered with a dilapidated platform. After explaining the dangers of this open cistern to the family, Mrs. Gehrig called the Health Commissioner who took action immediately to correct this safety hazard.

MISS FRANCES MURRAY, Middletown, Ohio, as part of an educational program, and in conjunction with others in the community concerned with safety measures, visited the fire house and observed a demonstration of the equipment used by the emergency squad.

Several of our Nurses have sent in interesting reports on meetings they have attended.

MRS. JOHANNA KENNEDY and MRS. GLADYS STANBOROUGH, Union City, N.J., reported on a case conference held at the New Jersey Mental Hygiene Clinic, Graystone Park, Morris Plains, N.J. Dr. Fuller, Chief Psychiatrist, commented on the peculiar way in which members in our culture greet each other. He felt that asking, "How are you?" and "How have you been?" focused attention on possible illness, or at least on the state of health. He preferred some statement like this, "How nice to see you," or "I am so glad to see you."

MRS. DOROTHY DEVLIN and MRS. MARGARET BLENKLE, Union City, N.J., reported on the meeting of the New Jersey State Tuberculosis

League in Newark. Dr. A.E. Jaffin, President, suggested the following as means of future control: routine chest X-ray, sputum examination, routine X-ray of diabetic patients, routine X-ray of pneumonia patients, routine X-ray of hospital admissions, preliminary tuberculin testing before use of X-ray in schools, and the use of BCG. He also urged all against complacency and warned that tuberculosis is far from under control.

MISS LAURETTA WARDIAN, Oak Park, Ill., reported on a talk given by Dr. Devlin on "The Basis of Neurotic Behavior." Dr. Devlin believes that behavior is always symptomatic and that neurotic behavior refers to a certain type or pattern of behavior. This behavior does not necessarily mean that the person acting in this way is neurotic. Occasionally, we all resort to some neurotic type of behavior, such as aches and pains, anxieties, hostility, or aggressive behavior. We need to be loved and to give love. Dr. Devlin concluded with this injunction: "Keep normal and don't forget to get somebody to love."

RECORD COMMITTEE

Suggestions for the revision of our nursing records have been received from time to time. Recently, a Record Committee was formed under the chairmanship of Miss Helen Snow, composed of Staff Nurses, Local Supervisors, Territorial Supervisors, and four members of the Home Office Nursing Bureau Staff. With certain modifications, we have all agreed upon the objective found in an article published in the *Journal of Social Casework* for January 1949, entitled, "Diagnostic Recording," by Ruby Little. Miss Little pointed out: "It is perhaps important to restate that the primary purpose of recording is to further the process of extending help to the individual. The main use of the record is to bring together the significant facts in the particular situation for study and consideration by the caseworker and for such help and direction as are necessary by supervisors and consultants." Please send your suggestions for revisions to Miss Helen Snow, Area Supervisor.

FLAMEPROOFING WEARING APPAREL AND HOUSEHOLD FURNISHINGS

As part of the Home Safety Session, Greater New York Safety Council Convention, a very interesting talk and demonstration on flameproofing materials were given last March by Mrs. Marie Schimmel, Instructor, Clothing and Textiles, Pratt Institute, Brooklyn, N.Y.

Mrs. Schimmel reported that many serious fires can be prevented by flameproofing such fabrics and textiles as draperies, curtains, linens, bedclothing, and articles of clothing which you wear.

The following table shows the degree of flammability of textiles before flameproofing:

COTTON - Ignites quickly, holds a steady flame, and is difficult to extinguish because of its tendency to smolder.

LINEN - Ignites with ease, keeps a steady flame, and is easier to extinguish than cotton.

WOOL - Difficult to ignite, keeps extinguishing itself, and is the least flammable of natural fibers.

SILK - Accepts flame, sputters and flashes but burns very slowly; it will extinguish itself.

RAYON - Regenerated Type (cellulose origin) Accepts flame easily, may flash up, and is difficult to put out.

Acetate Type

Flashes, drips and melts, ends curl up in gummy ball turning to hard residue. These gummy drippings may cause deep skin burns.

NYLON - Melts very slowly, also drips and may cause deep skin burn.

MILK FIBER - (Casein) known as Aralac in the United States. Ignites slowly, but burns with a steady flame. Economical

ASBESTOS - Non-flammable.

GLASS FIBER - Non-flammable - shows black after burning but this is due to carbon residue from fire.

WEIGHTED SILK - Chars only.

Mrs. Schimmel quoted the United States Department of Agriculture Bulletin, No. 1786, as giving the following solution and instructions for flameproofing textiles:

1 pound Crystalline Borax
13 ounces Boric Acid
2 gallons of hot water

Dissolve borax and boric acid in hot water, and then cool to room temperature.

Always use the solution on dry fabric as moisture adds water content. However, if the fabric does not accept moisture, then add soap to form a suds. If the mixture becomes jelly-like, dissolve over warm water (double-boiler principle). Dip fabrics until thoroughly wet and then wring out by hand. Always use a warm iron if fabrics are to be ironed.

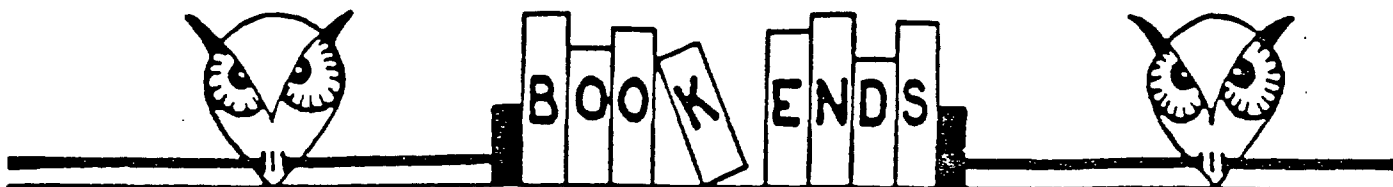
Effective flameproofing solutions do not prevent fires but they can reduce serious fire hazards. Fabrics which have been treated with such a solution are made SLOW-BURNING. They will not ignite readily nor burn rapidly, thus giving additional seconds in which to fight the fire. This lessens the danger of serious fires and severe burns.

REVISION OF NURSING TECHNIQUES

The long-looked-for revision of *Nursing in the Home and Nursing Techniques* is under way. In preparation for the revision, Miss Margaret Reid has reviewed the nursing technique manuals and the current practices of many leading institutions and agencies in the United States. The north, the south, the east, and the west, are all represented. University hospitals, other well-known hospitals, visiting nurse associations, and health departments generously made their procedures available.

It is hoped, therefore, that this revision, due for completion next fall, will be up-to-date and universal in its applicability.

2516



HOW TO LIVE LONGER - Justus Schifferes. E.P. Dutton, New York, 1949.

A direct, very simply written book on the principal causes of death, based on the latest Government statistics, and recent findings of medical and public health authorities. In addition to good discussions of the usual subjects - cancer, syphilis, tuberculosis, diabetes, cardio-vascular diseases - there are also some excellent chapters on subjects not usually included in such texts. For example, there is a chapter on "The Little Danger Signals" often ignored because of lack of knowledge; one on suicide, including a presentation of Dr. Menninger's three components in the suicide act; and the final chapter, which might be particularly helpful to nurses, giving the names and addresses of the organizations from which help and information on these various problems can be obtained.

LIFE IS FOR LIVING - D. Even Cameron, M.D. MacMillan, New York, 1948.

Dr. Cameron, Professor of Psychiatry at McGill University, has written a nontechnical text designed to help people who are groping their way through the confusions engendered by complications of present day living. He discusses the anxieties, guilt, damaging superstitions, and hide-bound rules which form the basis for many behavior patterns. He attempts to show how a knowledge of motivation and recognition of potentialities and limitations can help to make life more effective and more nearly the happy experience which it should be.

RHEUMATIC FEVER; NURSING CARE IN PICTURES - Sabra S. Sadler, R.N. J.B. Lippincott, Philadelphia, 1949.

One of the few texts available for re-

ference when actual nursing care in rheumatic fever is needed; demonstrates in pictures nursing hygiene and care in both acute and convalescent rheumatic fever cases.

EMOTIONAL HYGIENE: THE ART OF UNDERSTANDING. Camilla Anderson, M.D. J. B. Lippincott, Philadelphia, 1948. Fourth edition.

A new edition of this useful book.

NURSES HANDBOOK OF OBSTETRICS. Louise Zabriskie, R.N. and Nicholson J. Eastman, M.D. J.B. Lippincott, Philadelphia, 1948. Eighth edition.

THE ART OF CONFERENCE - Frank Walser. Harper Brothers, New York, 1948. Revised edition.

THE PREMATURE INFANT - United States Children's Bureau, Publication No. 325, 1948.

YOUR CHILD FROM 6 TO 12 - United States Children's Bureau, Publication No. 324, 1949. Price 20 cents, or may be borrowed from the Metropolitan Library.

ALSO WORTH READING:

THE STRUCTURE STUDY. *American Journal of Nursing*, April 1949.

SPEECH REHABILITATION FOLLOWING LARYNGECTOMY. James Greene, M.D. *American Journal of Nursing*, March 1949.

PROBLEMS OF COLOSTOMY PATIENTS - *Public Health Nursing*, January, 1949.

CARE OF THE CANCER PATIENT AFTER HE RETURNS HOME. Alton Oschner. *Journal of the American Medical Association*, August 28, 1948.

Note: Members of the N.O.P.H.N. are privileged to borrow books from the National Health Council Library, 1790 Broadway, New York 19, N.Y.

Miss A. June Bricker, Director of the Home Economics Bureau reminds us that the pamphlet **THREE MEALS A DAY**, has a new face, inside and out. We hope you will like the changes, and will use this booklet to advantage.

MISS BETSY BOYLIN JOINS METROPOLITAN TERRITORIAL SUPERVISORY STAFF



On May 31, 1949, Miss Betsy Boylin was appointed to the Nursing Service as a Territorial Supervisor. She will also be available to assist in integrating the principles of mental hygiene into

our Staff Education Programs, as for example at Regional Conferences, and in the Teaching Centers. At the present time, she has not been assigned to any specific territory.

Miss Boylin is a graduate of St. Luke's Hospital School of Nursing, New York, N.Y. She received her B.S. from George Peabody College, Nashville, Tenn.; her M.S. in super-

vision in Public Health Nursing and a professional diploma in Mental Hygiene from Teachers College, Columbia University.

Previous to her appointment to the Company, Miss Boylin was Supervisor and later Administrator of the Department of Health, Honolulu, Hawaii. Prior to that, she had experience on the supervisory level at Palama Settlement, Honolulu, Hawaii, and on staff level at the W.K. Kellogg Foundation, Battle Creek, Mich., and the Visiting Nurse Service of New York.

Our very best wishes go to Miss Boylin in her new position. We are delighted to have not only a well equipped Territorial Supervisor, but someone upon whom we can call to help us integrate the essentials of mental hygiene into our nursing services to policyholders.

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