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due to rusting, and the growth of rot, mildew, and mold will be fostered; damp air may cause marked bodily discomfort, besides. When the relative humidity is too low, there may be damage to furniture, as the joints and veneer are apt to come unstuck. Well-qualified medical opinion considers that there is no need for artificial humidification in homes, from the health standpoint, a position Consumers' Research believes fully warranted in view of the very low relative humidities found outdoors in many climates considered fully healthful. The accepted medical view is also that, for normal persons, a wide range of relative humidities is acceptable, and that comfort is a good guide. (Exceptions to this principle that arise are strictly in the area of abnormal or disease conditions; the physician, of course, should be the adviser in all such cases.)

In very recent experiments, it was found that proper diet protected experimental animals against harmful effects on the skin caused by extremely low humidities; it may therefore be that deficiencies of health supposedly caused by low humidity are at times manifestations of some dietary lack or inadequacy. (One prominent physician suggests that there should be high humidity indoors—45 to 85 percent, with a minimum perhaps of 25 percent—even if as a result there should be damage to the structure of the house itself. We do not consider that his position is supported in the literature and other information on this subject, which has been carefully studied by Consumers' Research over a period of several years.) From the standpoint of a house whose construction includes wood or wallboard, humidity should not be permitted to exceed about 40 percent, in ordinary cold weather; 30 percent when outdoor temperatures are between 0 and 15°; 20 percent in sub-zero weather. These values, intended to protect the house as a structure, are regarded by qualified medical men as unobjectionable from the health (physiological) standpoint.

## Cigarettes and Cigarette Filters

A NUMBER of recent issues of the Journal of the American Medical Association have presented discussions of cigarette smoking and its effects, and one, that of July 4, 1953, presents a study of cigarettes, cigarette smoke, and filters done in the chemical laboratory of the Association, at Chicago. Three brands of cigarettes having filter tips were tested. Four types of materials were used in the filters: one brand used paper, and the same brand sold at a later date used fiber; filters of the two other brands were asbestos and cotton.

The poorest of the filters, using paper, removed little more nicotine than did the same cigarette without the filter. The best of the filters, one using asbestos laminated with paper, produced a reduction of nicotine content of better than one-half. Cotton filters produced some reduction; one group of samples reduced nicotine by 14 percent, another by 27 percent.

With respect to removal of tars, the paper filters produced, as with nicotine, only a moderate reduction; the asbestos filter produced reductions of 44 and 55 percent, and the cotton filter reduced the tar content about 20 percent, as it did with nicotine. It was found in respect to one brand which used a paper filter that about the same reduction would have been achieved by leaving tobacco in the cigarette instead of the filter mouthpiece, and indeed the tobacco used as a filter was more effective in removing tars from the mainstream of smoke than the filter was.

It was interesting that two of the types of filters, those of paper and of cotton, produced a reduction of nicotine and tar content which was not considered large enough to be significant; with the asbestos filter, it turned out that a later "improved" model was much less effective than an earlier one. This came about, it is believed, in an effort to make the smoking qualities better by less tight packing of the filter material. In all cases, reports the A.M.A., the proportion of nicotine removed from the smoked portions is small.

The A.M.A.'s article explains how advertisers by using the proper stratagem and calculation can make a modest reduction of nicotine content appear to be very significant—which, though hardly news to people who write advertising copy, may be a surprise to some consumers. On the whole, consumers are wise to assume that when a cigarette advertiser makes a claim which seems to be based on scientific tests there will be more in the measurements and calculations than meets the eye and that, if the actual data upon which the claims are based are not made available to the inquirer, it would be just as well not to give weight to the findings.