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THE STORY OF THE U.S. PUBLIC HEALTH SERVICE
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TABLE OF CONTENTS

Editorial Page .................................................. 2

Capitol Hill News:
Senate Version of pay bill explained ... Recomputation
assured ... Dual Employment-Dual Compensation legis-
ation and hearings ... Widows to receive larger survivor
compensation ... etc ............................................ 4-11

Colonel John C. Curry Named a Director .................. 11

It's The Law: Important Court of Claims and Comptroller
General Decisions ........................................... 12-16

Defense Department conducts survey to determine practices
and needs of retirees and their dependents in the field of
medical care .................................................. 20-23

National Health: Key To The Future ... the story of the U. S.
Public Health Service ..................................... 24-27

"Are We Depending Too Much On The Mailed Resume?"—
Article by Lt. Col. Kent Collings, an authority on the
subject .......................................................... 28

Employment Offered ........................................... 29-31

Advertising Directory ........................................ 31

Obituaries ...................................................... 32

Local Organizations ... Activities of the chapters and clubs
in words and pictures ....................................... 34-38

Travel: Commander Si Cain's adventures in Japan, where
people are "most courteous and helpful." Also, Retirement
in Mexico, an anonymous offering ................................ 39-41

Navy POW Ruling Declared Unfair .......................... 42

Book Section .................................................... 43

Life Members ................................................... 44

Long Beach Regional Director Named ...................... 45

Navy Residence Foundation starts home for Navy-Marine
Corps widows .................................................. 46

Do Retired Members Have More Dependents Than Active Duty
Members? ....................................................... 47

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National Health: Key to The Future

... the Story of The U.S. Public Health Service

by

Dr. Luther L. Terry
Surgeon General, U.S. Public Health Service

In the nuclear-space age, national health—reservoir of human power—fuels the creative-productive engines of the nation. To advance science and technology—agriculture and industry—military defense—space exploration—human well-being: all of these depend upon healthy, dynamic citizens.

In scope, mid-20th century health horizons have expanded from physician-patient, local community relationships to en masse nationwide—yes, global—programs. The life-and-death struggle reaches far into remote, disease-turking corners of the earth ... and deep into the secrets of human life, itself. As long as disease—uncured, unprevented, or uncontrolled—exists anywhere in the world, it threatens human life.

PROGRESS ... IN HEALTH

In recent decades, fortunately, there has been significant progress—greater, in fact, than in all previous history. The prominent results include: Extension of life expectancy from 47 years in 1900 to 70 now. A sharp decrease in infant mortality. Advances in controlling and/or preventing such diseases as: tuberculosis, poliomyelitis, measles, influenza, and venereal disease, extension of medical care to more citizens (although many still remain unprotected), and general improvement in the nation's health.

CHALLENGES AHEAD ...

Despite such progress, however, the fight has just begun ... Yearly, disease and illness still result in more fatalities than all U.S. military battles of history. (Over 1½ million die prematurely, as compared to 989,000 battle deaths for all wars.)

On the health fronts, the major crippling-killer enemies include:

- The chronic conditions—such as heart disease, cancer, and mental illness—are high on the list of causes of disability and death.
- Diseases of the heart and blood vessels result in nearly 1 million deaths annually.
- Cancer—According to estimates, about 1 of every 6 persons will die of cancer—LESS effective treatment is found.
- Mental Illness—Over 500,000 are in mental hospitals; and, over 15 million are considered to suffer from a degree of such illness.
- Chronic Disabilities—Approximately 19 million persons are limited to some extent in their activities due to chronic disease of impairment.
- Among the 6 million of those unable to work, keep house, or carry on other major activities, 24% report heart conditions as the cause—16%, arthritis or rheumatism—and 11% visual impairment. For 16 days a year (higher among aging), also, the average person's activities are restricted by illness or injury—including 6 days of bed disability.

As reflected by such diseases and illnesses, there still exist many dangers to health and life.

OPERATION “LIFE-SAVING”

For “Operation Health-and-Life Saving” the nation has greatly expanded the U.S. Public Health Service (PHS). Under the Department of Health, Education, and Welfare, PHS now serves as the major federal agency charged with protecting and improving the health of the nation.

Headed by the Surgeon General, the Service: Administers health laws and programs; spurs the development of non-governmental health facilities and services throughout the nation; provides medical services to persons lawfully authorized to receive such care; runs Foreign Quarantine stations—to prevent importation of disease; and advises on National Health Policy.

MANNING HEALTH BATTLE-LINE

Headquartered in Washington, D.C., the health forces—largest in U.S. history—include over 34,000 employees engaged in over 300 occupational units; 135 outpatient clinics; 50 Indian hospitals; over 100 health centers, field stations, and other facilities. A system of grant-support for worthy medical efforts in non-governmental institutions further extends the health-defending arm of the Service.

HEALTH “COMMAND POSTS”

Across the nation—and around the world—the PHS “Command Post”—in peace and war—includes:

- Combating Epidemics: The Communicable Disease Center of Atlanta, Georgia, commando-like units of Epidemic Intelligence Officers stand ready to launch "on-the-scene" attacks on epidemics, or other health hazards, anywhere in the nation ...
or the world.

Fighting Chronic Diseases: For persons suffering from chronic diseases and illnesses, six special programs are now in operation: Cancer Control, Diabetes and Arthritis, Gerontology, Heart Disease Control, Neurological and Sensory Disease Service, and Nursing Homes.

Radiological Health: In the Nuclear age, radioactivity in "air we breathe"—particularly from bomb tests—creates an ever-greater threat to health. The Radiological Health forces wage a nation-wide campaign to monitor radioactivity; and then, to develop methods to protect humans.

International Health: Realistically, disease recognizes no national boundaries. For this reason, the PHS Office of International Health cooperates with nations around the globe—and through international organizations such as the World Health Organization and the Pan American Health Organization—for the conquest and "stamping out" of disease.

Guarding U.S. Health Borders: The Foreign Quarantine Service "stands guard" at 300 land and sea ports of entry—and in foreign ports of departure for U.S. to stop disease—carried by humans, animals, or plants—from invading the nation.

"Home Front" Protection: For protecting the "home front," the Community Health Services Program plans the development of health-care capabilities through: 1) Technical assistance training and guidance; and 2) "Helping Hand" financial support as necessary.

Research—Key to Health Progress: For the future, research in human health—like defense, space, industry, agriculture—remains a key to progress.

Within PHS, the National Institutes of Health (NIH) carry forward the greatest research effort in the world.

In scope, the Programs are aimed toward cure, prevention, or control of all the diseases and illineses of mankind. In many health fields, nine special Institutes have been established, including: Cancer; Heart Disease; Allergy and Infectious Diseases; Arthritis and Metabolic Diseases; Child Health and Human Development; Dental Research; General Medical Science; Mental Health; Neurological Diseases and Blindness.

Research NIH transmits a great flow of life-saving medical knowledge into the bloodstream of America.

Surviving Atomic Attack: The 20th century capability for catastrophic war—nuclear, biological, chemical—also requires strong defenses not only against existing—but also potential—dangers to health and life.

In event of nuclear attack, for example, the nation could well suffer:

** A casualty level of over 60 million persons (¼ of the population);
** 12 million immediate deaths; which could increase to 34 million in 30 days; and over 40 million at the end of 6 months;
** Blast, thermal, and radiation casualties surviving D-Day to beyond 6 months would number about 20,000—less than a majority of whom would recover.

To help protect Citizens, PHS has established a Health Mobilization Program. The objectives include:—Mobilizing—civilian health manpower; setting up thousands of emergency hospitals; developing a casualty-care capability; protecting of non-casualty population; and other pre-attack and post-attack health services.

An atomic attack—despite safeguarding precautions—would deprive millions of citizens of access to doctors and medical facilities. For survival aid, PHS, also has developed a Medical Self-Help program. This includes locally-taught lessons on: radioactivity shelters and fallout; preservation of food, water, and other supplies; treatment of shock and care of sick and injured; emergency childbirth; and other life-saving measures.

... A PROUD HISTORY

Historically, PHS has a proud record of service to the nation. Organizationally, the highlighy of progress include:

1798: The forerunner of PHS—a single Marine Hospital—was established to care for ill and injured Merchant Seamen.

1870: The Marine Hospital Service was re-organized and expanded; a Surgeon General was appointed for the Service.

1878: A Foreign Quarantine Service was established to prevent the importation of disease.

(Continued on next page)

Eskimos of Point Hope, Alaska, a village inside the Arctic Circle, wait on the quarter deck of the U.S. Coast Guard KLAMATH for their turn in the dental chair.
The U.S. Public Health Service And What It Does For You And For National Defense

(Continued from preceding page)

1912: The Act of 1912—establishing the Public Health Service—further extended the health-protecting responsibilities to include studies of the diseases of man.

COMMISSIONED CORPS

With ever-broadening, health-protecting responsibilities, the Nation required a professionally-competent, disciplined staff to serve as a nucleus of the Public Health Service.

For this reason, the Commissioned Corps was established in 1873; and, 16 years later, was given recognition by Congress.

In stature, the Corps ranks comparable to other uniformed services—Army, Navy, Air Force, Marines, Coast Guard, and Coast and Geodetic Survey.

Presently, the Corps is a professional career organization of exceptionally qualified physicians, dentists, sanitary engineers, nurses, scientists, and other categories of professional personnel.

Like the Armed Services, PHS Regular officers are appointed by the President—agree to serve wherever the needs of the Service require—and are governed by similar promotion, rank, and tenure systems.

The Reserve Corps is appointed by the Secretary of Health, Education, and Welfare on behalf of the President.

In contrast to the Regular Corps, the Reserve is not necessarily a career service, as such; rather, it increases or decreases in size as programs of the Service expand or contract.

For emergency preparedness, the Inactive Reserve comprises an organization of trained professional health and health-related personnel. They are held in reserve for national emergencies involving partial or full mobilization of the nation's health resources.

Selective Service Obligations. By serving in PHS, draft registrants can fulfill their Selective Service obligation by serving two years of active duty as officers in the Commissioned Corps. Upon completion of their tour of duty, officers will have complied with all requirements of the Universal Military Training and Service Act regarding obligated military service. Internship (medical, dental, and pharmacy) or training under certain student programs, however, are not considered part of the obligated service.

The Corps is administered by the Surgeon General, who is appointed by the President from the Regular Corps. The Surgeon General holds rank equivalent to the Surgeons General of the Army, Navy, and Air Force.

CHALLENGES OF TOMORROW

For the future—as in the past—the commissioned Corps will serve as a disciplined "nucleus" of health protecting forces for the nation.

To win the war against disease, illness, and human maladies will require a greater mustering of human resources of the nation. The major features of the all-front battle for better health include:

Health Forces—A mustering of greater health forces—to win more victories over the diseases and illnesses that cripple or kill more than 1½ million persons each year.

Broader Health Care—The goal is adequate medical care for more—and ultimately all—U.S. citizens.

Environmental Health—The technological age casts off deadly by-products—such as radiation and harmful chemicals—that pollute air and water and jeopardize health. To guard against such

Examining rabbit's eye in study of a blinding disease, uveitis due to toxoplasmosis.

In the Communicable Disease Center, Atlanta, Georgia, a monkey is utilized in a laboratory study relating to polio.
hazards requires a more effective, protective system.

Medical Communications: A better communications system is essential for “speedily” transfusing advancements and breakthroughs in medical knowledge into the lifeblood of America.

For accomplishing its mission, the nation will depend upon human resources—intelligent, creative, dedicated individuals—to carry forward its health-protection and improvement programs. The health professions—physicians, nurses, dentists, sanitary engineers, serve as the “heart” of the program.

A national-global, all-out war for better health, however, cannot be fought by the medical profession alone. Like a military operation, rather, it requires organization, supply, transportation, all kinds of strategic and logistic support for a campaign. This requires a variety of skills and professions including: administrators, engineers, legal advisors, mechanics, statisticians, secretaries—in PHS, numbering over 300 occupations.

As in exploration of outer space, the “ultimate” in health progress is still beyond the known horizons . . . beyond, perhaps, even the imagination of man. But victories can—and will—be won.

The challenges are great! The rewards, however, are even greater: For the nation: stronger, more dynamic citizens and for humanity: promise of a longer, better life.

The trough into which Dr. Howard L. Andrews and his co-worker, Mrs. Dorothy Peterson, are placing the transparent manikin is lined with radiation counting devices. This instrument was developed for the National Institutes of Health. By filling any of the manikin’s body compartments with a known quantity of radioactive material and checking it in the counter, accuracy of the equipment is insured. Data recorded in this manner also permit accurate comparisons with radiation intake of persons receiving isotopes for diagnostic procedures, for therapy, or from radioactive fallout.

Visits in the New Mexico desert country keep the public health nurses busy, and ancient tribal customs often bring up new problems. Villagers asked a nurse to check the condition of an 80-year-old Navajo, who feared death was near. If he died in the hogan, it would have to be burned or abandoned, so he rests outside.