fare by failing to report communicable diseases to the health officer?

Do I strive to keep public health matters out of partisan politics? Do I keep abreast of progress in public health?

If not, why not?

Infant Mortality in the United States During One Year of War. Frederick S. Crum, Newark, N. J. American Journal of Public Health, Vol. 9, No. 4, p. 241.

The data for this study were available in the weekly telegraphic reports of 46 cities made to the United States Bureau of the Census. The period covered was the year ending September 28, 1918. During that year the infant deaths in the 46 cities totaled 50,875. On the basis of previous experience, it was estimated that a very substantial reduction had been effected in the general death rate of infants in practically all of these 46 cities. In other words, intensive preventive work largely due to the Federal Children's Bureau and its Children's Year was more than an offset to any unfavorable conditions inimical to infant life. This condition was changed completely with the onset of the influenza epidemic which was raging as the year covered by this study closed.

The infant death rates as calculated on the estimated populations under one year of age of the 46 cities showed wide variations, or from 44.0 per 1,000 in Spokane to 187.0 in Baltimore. Sixteen North Atlantic cities showed an average rate of 108.0 against an average rate of only 67.3 for seven far-Western cities. The death rates were highest in the Central Atlantic and Southern cities, averaging respectively 151.8 and 111.6. In the 14 cities of the middle West the death rate averaged 103.7.

The author shows that although climate and locality are important factors in determining infant mortality the most hopeful method of attack is in the education of the mother. Prenatal care and breast feeding are likely to result in the largest saving of infant lives. This conclusion seems to be verified by the New Zealand and other experiences.

The paper contains five charts illustrating the differences in infant mortality rates by geographical areas, and two charts illustrating the seasonal variations of infant mortality in New York City and Chicago.

A Rapid Method for the Identification of Bacteria-Fermenting Carbohydrates. J. Bronfenbrenner and M. J. Schlesinger, Cambridge, Mass. American Journal of Public Health, Vol. 8, No. 12, December, 1918, p. 922.

In isolating non-lactose fermenting members of the colon-typoid group, one frequently encounters strains of *B. coli* which ferment lactose remarkably slowly. The method here described permits early and efficient elimination of these slow lactose fermenters, and is simple enough to permit of the examination of every suspicious colony on the plate.

The authors prepare a medium containing 1.5% of agar, 0.5% of sodium chloride, 1% of peptone, 2.0% of carbohydrate and a suitable

quantity of indicator. While hot, this lactose agar is deposited in drops by means of a sterile capillary pipette on the inner surface of the bottom of a Petri plate. Inoculate each drop with the material from individual suspected colonies; then place a fresh drop of the same lactose agar over each one of the primary drops, thus securing the conditions of slightly lowered oxygen tension, favorable for the carbohydrate metabolism of bacteria. Invert the plate and place in the cover a filter paper moistened with 2.0% NaOH to neutralize volatile acids and to make a moist chamber.

By this technic one causes a comparatively large number of bacteria to grow in a very circumscribed area, thereby sharpening the reaction, and the appearance of acid is frequently noted after four to six hours of incubation. Moreover, if the drop cultures are permitted to grow twenty-four to forty-eight hours, it is possible to eliminate a very large proportion of slow fermenting strains of *B. coli* which produce acid on liquid lactose media after only eight to ten days.

Problems of Canning. Willard D. Bigelow, Washington, D. C. American Journal of Public Health, Vol. 9, No. 4, April, 1919, p. 283.

This is the report of a committee of the Food and Drug Section and is mainly a report of progress. A brief statement is made of the work being done and the investigations now underway.

Tin Plate Investigation.—Study is being made by means of extensive experimental packs of the desiderata of tin plate intended for the manufacture of food containers.

Discoloration of Contents.—Several types of discoloration occur in canned foods owing to causes only partly understood. These have no influence on the health of the consumer, but are objectionable because they detract from the appearance of the food. Much study is being given to this subject, especially to the cause and prevention of black discoloration on the inner surfaces of cans containing corn.

Bacterial Flora in Canned Foods.—Much work is being done in identifying bacteria which cause spoilage and determining the time and temperature of sterilization necessary for their destruction.

Heat Penetration.—In order to make use of the data obtained by the bacteriological work mentioned above, a study is being made of the rate of heat penetration in different articles of food and the temperature curve in the center of the can during sterilization and cooling.

Standards for Canned Foods.—Progress is being made in formulating standards and definitions which it is held will promote greater uniformity in canned foods and will permit the labeling of the products in such a manner that the consumer can buy more intelligently.

Food Poisoning.—Distinct progress is being made in the study of food poisoning previously reported and some publications relating to the matter will appear shortly.