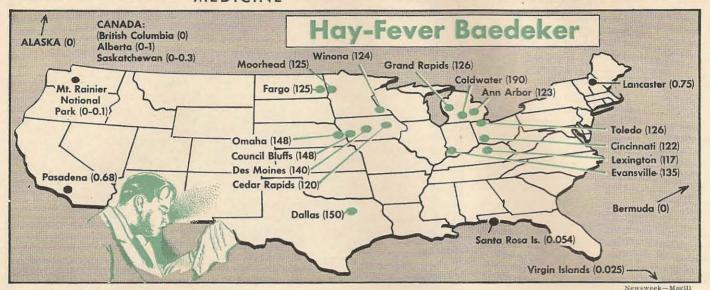
NEWS SAPERAL CALING Red China's Bluff? Are We Really Calling Red China's Bluff? (See International) AUGUST 9, 1954 20c



Cruising: The Nation Takes to the Wc 500

BVA VIWAL & 248 FRANCISCAN FATHERS

(See New Section—LIFE AND LEISURE)



The pollen counts ranged from zero in Alaska to a top figure of 190 in Coldwater, Mich.

Sneeze Season

To the 4 million red-eyed hay fever sufferers who are sensitive to ragweed pollen, Aug. 15 marks the start of another annual sneeze. Most of these folk endure their six to eight weeks of misery at home, trying new drugs—pills, injections or inhalants, or visiting new allergy specialists. The fortunate ones escape on a sea voyage, or, if they can find it, to a vacation spot said to be free of the ragweed plant, the chief allergic offender.

The American Foundation for Allergic Diseases, Inc., has just published a timely Baedeker for these victims of medicine's most annoying chronic condition. "Hay Fever and What You Can Do About It," is a pamphlet that includes a list of 604 communities in the United States and adjacent areas, with their ragweed pollen rate given (see chart). Any count over 10 means that the spot is not recommended to victims of this allergy.

Pollen counts range from Alaska, where the index is zero, to Coldwater, Mich., with a top 190. Dallas, Texas, 150; Omaha, Neb., 148, and Toledo, Ohio, 126, are good places for the hayfever subject to avoid. Pasadena, Calif., on the other hand, has a sneeze-proof rate of 0.68; Miami Beach, Fla., 0.26. Vacations in allergy-free spots will have to last until the first frost wilts the ragweed and other air-borne pollen. Otherwise, the hay-fever sufferer, on returning to his home, will resume his grim round of sneezing.

Prideful Addicts

The eight Demerol addicts (five men and three women) were voluntary patients at the Payne Whitney Psychiatric Clinic of New York Hospital-Cornell Medical Center. Two of the men were practicing physicians who feared discovery of their addiction to this morphinesubstitute. Two women came in on their doctors' recommendations; one, to please her husband. The others were there because of Demerol overdosage.

Not one of the patients would admit to the psychiatrists, Drs. William D. Voorhees Jr. and Albert N. Browne-Mayers, that the drug produced blissful euphoria or De Quincy dreams. All gave physical illness and discomfort as the initial reason for using it. Five readily agreed that once begun on the drug, they continued to use it to ease their anxiety, tension, insomnia—and strong feeling of resentment.

The last excuse gave the psychiatrists the real clue to the patients' addiction. All were hardworking, capable men and women in their business and professional lives, the doctors point out in the New York State Journal of Medicine. But personality studies revealed that they were proud, tense people who could not accept their shortcomings and had a compulsive need for recognition in terms of prestige, wealth, and professional standing. All had a deep desire to be appreciated and loved, yet lacked the ability to give of themselves in interpersonal relationships. When their needs were not met, they found solace in Demerol.

Frustrated: One was a successful businessman, polite and congenial, yet insistent on having his way. Because he could not express his resentments to his business associates, he had suffered migraine headaches for 35 years.

Another was a registered nurse, ingratiating in manner, with a strong sense of obligation and an intense resentment at being "pushed around." A third was a driving, ambitious doctor; his strong underlying feeling of inadequacy was heightened by failure to pass his specialty board examinations.

After Demerol was withdrawn, these

proud, sensitive people showed little response to psychotherapy. Because of their personality structures, they could not cooperate or even admit the need for help. From their study of these strange men and women, nevertheless, the Payne Whitney psychiatrists learned something new. Electroencephalograph results showed that Demerol slowed the patients' brain waves only so long as its use was continued. This leads the doctors to believe that the drug's addictive qualities are not physical but psychological.

Look to the Leaf

The Yale University biometrician who warned cigarette smokers of the perils of lung cancer and heart disease (Newsweek, June 28) now has a practical suggestion for averting this hazard.* The best course, Dr. E. Cuyler Hammond said last week at the Sixth International Cancer Congress in São Paulo, Brazil, is for tobacco manufacturers to develop new types or strains of cigarette tobacco, free of the substance or substances which some scientists suspect may cause these diseases.

The cigarette danger, Dr. Hammond explained, may lie in the special type of tobacco used only in cigarettes. The tobacco could contain one or more chemicals which adversely affect the heart, blood vessels, lungs, or other tissues of certain people. Developing "a harmless strain of tobacco plant" would be less difficult, he asserted, "than to use a highly toxic strain and then attempt to remove the harmful ingredients from the tobacco by chemical means, or from the smoke by a filter or condenser." This

^{*}A research committee, formed this year by the tobacco industry, is now undertaking "a study of the physical and chemical composition of tobacco and accompanying products... of tissue changes in humans and animals under various conditions [and] of smoking and other tobacco habits and of the emotional and physical make-up of smokers."