

SUGGESTIONS FOR THE FUTURE¹

GEORGE CHEEVER SHATTUCK²

I accepted the Presidency of the Academy of Tropical Medicine with deep feelings of personal gratitude to my colleagues, and also in the belief that they intended, through me, to pay a compliment to Harvard University for the work in tropical medicine which has been conducted there for many years.

In his presidential address to the Academy last year, Dr. Strode advocated federation of the American Academy of Tropical Medicine, the American Society of Tropical Medicine, the National Malaria Society and certain other groups. He pointed out that the membership of each of these organizations is small, and that our potential influence could be greatly enhanced by federation. The idea of federation has received general approval, and steps in that direction are being taken. The bodies joining in federation need not lose their identity. Each should continue to have its function.

My principal concern tonight is to suggest an expanded program for the Academy. You have heard Dr. Faust's resumé of its accomplishments. Organization of the Foundation for Tropical Medicine was delayed by the death of Dr. McKinley, who had been the chief exponent of the idea. Plans for fund raising were further delayed by a severe financial depression and subsequently by a world war. Nevertheless, the persistent work of Dr. Mackie and others finally brought the Foundation into being and it has helped to support teaching and research in tropical medicine.

Most of you attended the Congresses of Tropical Medicine and Malaria last spring. They were an outstanding success. The Academy can well derive satisfaction for having taken the initiative by proposing that the Congresses should be held here, for enlisting the support of other groups, and for the important part played by some of its members in organizing the program of the Congresses.

If the Academy is to be as useful as possible in the future, I believe that it should adopt a continuing program and that it should assume new functions. For example, the Academy might:

1. Have a Standing Committee to keep in touch with legislation related to tropical medicine in the United States of America or abroad, and to recommend appropriate action from time to time.
2. The Secretary's office might also establish a clearing house for information required by teachers and students of tropical medicine and allied subjects. Information should be readily available about:
 - a. opportunities for study or research in the U. S. A. or abroad;
 - b. sources of financial support for individuals or projects; and
 - c. activities of the World Health Organization, Inter-American Sanitary Bu-

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² Harvard Medical School, Boston 15, Mass.

reau, Research being conducted by United States Public Health Service, the Army and the Navy and also that going on in academic institutions.

3. Most important of all, the Academy should participate actively in the scientific meetings of the affiliated societies.

To this end, I suggest:

- a. that half a day should be allotted to the Academy for a scientific program;
- b. that the program should consist of a symposium on some broad medical problem of the tropics;
- c. that the subject should be approached from the standpoint of public health;
- d. that the most eminent persons conversant with the subject whether living in the U. S. A. or abroad should be invited to participate; and,
- e. that the addresses and abstracts of the discussion should be published by the Academy.

The time is ripe for a program of this character because interest in health in the tropics was aroused during the Second World War and this interest should be maintained and strengthened. Moreover, it is evident that for years to come American tropical medicine must play a leading role in the prevention and control of tropical diseases throughout the world.

As a subject for a symposium, the Academy might accept Dr. Strode's challenge of last year to explore the possibilities of controlling the effects of climate in the tropics. There are unsolved problems here of major importance. Air conditioning, of course, is possible but its use to the best advantage in the tropics requires much more knowledge than we have today.

Still more vital problems exist in the field of nutrition. You all know that most of the indigenous races of the tropics are undernourished. It is significant that the standard load for a porter in Liberia weighs only thirty pounds, whereas a porter should be able to carry fifty pounds easily enough. They cannot do so in Liberia because they are underfed, or ill, or both. If the tropics are to become an increasingly important bread-basket for the world, the laborer must be protected from disease and he must have sufficient food.

Nutrition is a subject of the highest importance for tropical medicine. Clearly, today it is a world-wide problem as well. We are becoming more and more conscious of the meaning of population pressure against food supply, which was pointed out by Malthus in the last century. Increase of population is being balanced to some extent at present by increased food production and by improved distribution. Nevertheless, in many parts of the world people are living now at a low subsistence level, while in other countries, there is widespread famine. Can people in the future obtain sufficient food when war, as we all pray, shall have ceased and when preventable disease in the tropics and elsewhere shall have been controlled? Will not population pressure against food supply lead ultimately to mass starvation? For how long can increase of food production counter-balance increase of population? A respite is possible by better distribution, by application of improved methods of agriculture and by cultivation of new land, so long as new land still exists. But students of conservation have said

that millions of acres of once cultivable land in the United States alone have been rendered sterile by mining the soil, or have been destroyed by erosion.

If you look at the muddy waters of the Mississippi you will see the wealth of a continent on its journey to the ocean. If you contemplate a barren hillside, you may realize that the ax has felled the protecting trees, that fire has consumed the humus and that rain has washed away the soil.

Where the turf of the windswept prairie has been broken by the plow, sooner or later comes a season of drought. The result is a dustbowl. Much of the top-soil is blown away and the dust in the air causes lurid sunsets. But it is the top-soil, and almost exclusively the top-soil, which provides food for man and beast.

Osborne and other students of the subject have pointed to the vital importance of soil conservation, and Vogt in his book entitled "Road to Survival" has dramatized the danger. He told me recently of a profitable coffee plantation upon a hillside in Venezuela. The forest above the plantation has protected it by controlling the run-off of the rain, but now there are plans to clear the forest and to plant the land to corn. If this is done, the coffee plantation will soon be washed away. Will the higher land long continue to yield corn? Certainly not. It, too, will be washed down the mountainside and no productive land will remain there. This sort of destruction of the soil is going on nearly everywhere in the tropics with the result that potential food production is being continually reduced.

Can we as physicians, sanitarians and medical scientists help to solve these vital problems of nutrition? Perhaps we can be of some service in this field. I bespeak your earnest consideration of that question.