

NATIONAL HEALTH PLAN

HEARINGS

BEFORE A

SUBCOMMITTEE OF THE COMMITTEE ON INTERSTATE AND FOREIGN COMMERCE HOUSE OF REPRESENTATIVES

EIGHTY-FIRST CONGRESS

FIRST SESSION

ON

H. R. 4312 and H. R. 4313 (Identical Bills)

AND

H. R. 4918 and Other Identical Bills

- Title I**—Education of Health Personnel
Grants and Scholarships
- Title II**—Medical Research
Blindness and Eye Diseases
Arthritis and Rheumatism
Multiple Sclerosis
Cerebral Palsy
Epilepsy
Leprosy (Hansen's Disease)
Cancer, Heart Disease, and Poliomyelitis
Medical Care Investigation Commission
Research in Alaska
Research on Family Aspects of Chronic Illnesses
Survey of Sickness
- Title III**—Hospital Survey and Construction Amendments
- Title V**—Grants to States for State and Local Health Work
Local Public Health Units

MAY 20, 24, 25, JUNE 7, 8, 9, 10, 16, 17, 21, 22, 23, 24, 29, 30,
AND JULY 6, 1949

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Interstate and Foreign Commerce



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NATIONAL HEALTH PLAN

THURSDAY, JUNE 23, 1949

HOUSE OF REPRESENTATIVES,
SUBCOMMITTEE ON PUBLIC HEALTH,
SCIENCE AND COMMERCE OF THE COMMITTEE
ON INTERSTATE AND FOREIGN COMMERCE,
Washington, D. C.

The committee met at 10 a. m., Hon. J. Percy Priest (chairman of the subcommittee) presiding.

Bills considered: H. R. 4312 and H. R. 4313 (identical bills)—national health, with respect to title II—medical research.

H. R. 4918, H. R. 4919, H. R. 4920, H. R. 4921, H. R. 4922, H. R. 4923, H. R. 4924, and H. R. 5087 (identical bills)—national health.

H. R. 3934—Omnibus medical research bill.

Cerebral palsy: H. R. 1729, by Mr. Priest; H. R. 3258, by Mr. Biemiller, and H. R. 3645, by Mr. Battle (identical bills)—to amend the Public Health Service Act to provide for research and investigation with respect to the cause, prevention, and treatment of cerebral palsy, and for other purposes.

Epilepsy: H. R. 3893, by Mr. Biemiller—to amend the Public Health Service Act to provide for research and investigation as to the cause, prevention, treatment, and possible cure of epilepsy.

Leprosy (Hansen's disease): H. R. 4030, by Mr. Peterson—to amend the Public Health Service Act to improve the leprosy situation in the United States, and for other purposes.

Cancer, heart disease, and poliomyelitis: H. R. 3929, by Mr. Hand—to provide for the mobilization of the scientific resources and knowledge of the United States for the purpose of seeking the causes and cure of cancer, heart disease, infantile paralysis, and other diseases of mankind.

Mr. PRIEST. The committee will come to order.

We have before us this morning a continuation of hearings on medical research. The committee is considering a number of separate bills dealing with this subject. We are considering also title II of the omnibus bill, H. R. 4312 and H. R. 4313, the bill H. R. 4918, and a number of companion and identical bills.

We are considering today also bills dealing with cerebral palsy, epilepsy, and leprosy.

The chairman desires to state at this time that the House meets at 11 o'clock today, and we do not know how soon after the House convenes there may be a quorum call. We have a large number of witnesses. We hope to accommodate all the witnesses in some manner during the day, but if the schedule is somewhat irregular you will understand that after 11 o'clock today the responsibility of the Members is on the

country, where they could have had consultants from that school. Instead, it is a place 83 miles from that school.

I might also add that in Hawaii the legislature has passed a law which changes the name of this disease from leprosy to Hansen's disease. That was passed by the last session of the legislature.

Mr. PRIEST. Are there any further questions?

We thank you very much for your appearance before the committee and I am sure the committee appreciates the earnestness and zeal which you have shown in the work which you are doing. We hope that in some way we may be helpful in that work. Thank you.

Mr. FARRELL. Thank you, Mr. Chairman.

Mr. PRIEST. There are two other witnesses who had at first expected to be present today but cannot be on hand and have requested that they be allowed to file statements.

I have a statement here from Dr. Eugene R. Kellersberger, referred to by Mr. Farrell as one of the leading authorities on this subject and without objection his statement will be included in the record.

(The statement is as follows:)

STATEMENT FILED BY EUGENE R. KELLERSBERGER, M. D., GENERAL SECRETARY,
AMERICAN MISSION TO LEPROS, INC., NEW YORK, N. Y.

For 43 years the American Mission to Lepers has been deeply concerned about the physical, mental, and spiritual welfare of those afflicted with leprosy around the world. It has been a pioneer, together with the Mission to Lepers in London, for three-quarters of a century in establishing leprosy homes, dispensaries, and clinics, agricultural colonies, uninfected children's homes, and in doing a practical, clinical research work through its doctors and nurses who are always medical missionaries. This work is being carried on through all the Protestant mission societies of the United States and Great Britain. It has done a large and important work in preventing leprosy in children and in teaching the world the truth about the disease. It has trained many workers throughout the world to help bring to the attention of everybody the unhappy and intolerable lot of some five to ten million of our fellowmen. It cooperates fully with all governments.

This mission, through its various avenues of publicity, has often expressed itself as definitely favoring the enactment of a new national leprosy act, correcting present archaic laws and removing unjust provisions that are out of date and that defeat the very purpose for which they were enacted. H. R. 4060, as presented by Col. George H. Rarey and Mr. Paul A. Strachan of the AFPH (American Federation of Physically Handicapped) has in it many fine features that commend themselves to all of us. There are, however, some provisions which require close study before they are fully accepted by all who are interested and have the responsibility of carrying out the provisions of the act.

As a member of the Surgeon-General's Advisory Committee on Leprosy in the United States the writer has constantly regretted that excellent and exhaustive study of this problem by the AFPH was mostly done apart from close consultation with the Public Health Service, which is directly responsible for this program at the present time and has been for 50 years. I have insisted that the lay and medical leaders concerned in developing this most important program must work out together with the Public Health Service and others concerned a constructive act that will result in many much-needed changes, yet remain an act that will have the full cooperation of all groups. I consider it essential to fully consult with the Public Health Service, with its invaluable experience and faithful service at Carville for the past 50 years. This view was evident in the findings of the Senate hearing committee on H. R. 704. As a result of this hearing the leaders of the federation and the Public Health Service were instructed by Senator Puppen to go into conference and to submit an act arrived at after full consultation with all who are so deeply concerned.

We are in hearty accord with the provisions which advocate financial aid for the dependents and compensation for the physically disabled discharged patients and provision for rehabilitation and training. We agree that the education of the

medical profession and the general public is essential and that research work must be intensified. We favor abolishing forced segregation and substituting for it voluntary treatment based on early diagnosis and confidential treatment of such as apply for help, as is done in other diseases. We cannot agree that at present it is necessary to spend several millions of dollars to build another large institution in a nonendemic State since, in general, we do not believe that leprosy is an institutional disease or one which as a rule requires hospitalization. We agree with Dr. Perry Burgess that not enough use is being made of existing facilities throughout the country where hospitalization or dispensary treatment can be provided. We believe that in every large city there should be diagnostic centers such as have just been established in the city of New York, to study tropical diseases, and that this should include a definite study of all possible cases of leprosy. Furthermore, these cases of early leprosy should be referred for study, classification, and treatment when possible to the dermatological clinics of medical schools and hospitals. More and more such cases, being assured of privacy and the absence of stigma, would cooperate with the authorities and with the present therapeutic help and with the social-service follow-up. More and more cases, also, would be reached early. It would thus be unnecessary to send them to an institution. For such as do have to go, the present magnificent plant at Carville would still serve fully.

We wish to give testimony to the earnest efforts of the leaders of the American Federation for the Physically Handicapped in trying to obtain justice for our friends afflicted with this ostracizing disease. We further wish to go on record in commending the excellent and devoted medical and nursing service that has been given through the years at our great National Leprosarium by its medical, technical, and nursing staff, a part of the United States Public Health Service.

Mr. PRIEST. I also have a statement here from Mr. Perry Burgess, who is president of the Leonard Wood Memorial. Without objection, his statement will be included in the record.

(The statement is as follows:)

STATEMENT OF MR. PERRY BURGESS, PRESIDENT, LEONARD WOOD MEMORIAL
(AMERICAN LEPROSY FOUNDATION), NEW YORK, N. Y.

The Leonard Wood Memorial for the Eradication of Leprosy was incorporated in the State of New York in 1929. It carries the name of the great American soldier, Gen. Leonard Wood, through whose efforts the condition of leprosy patients in the Philippines was greatly ameliorated. The memorial is supported entirely by gifts from the public. The chairman of the board of directors is the Honorable Henry L. Stimson. Since 1931, under the guidance of an advisory board of distinguished medical scientists, the memorial has devoted itself to scientific studies of leprosy. It has a research laboratory at the Cullion leprosy colony in the Philippines and another at the Harvard Medical School. Studies of the home and other environmental conditions under which the disease occurs have been carried on in the Philippines since 1933. Grants have been made to research workers in a number of leading medical centers. Fellowships for study in the United States have been given to a number of foreign leprosy workers, and aid to several international congresses on leprosy. A scientific publication, the International Journal of Leprosy, is subsidized by the memorial.

In the United States, leprosy is indigenous only in southern California, Florida, Louisiana, and Texas. There are about 400 patients under treatment at the National Leprosarium at Carville, La. The number not under treatment at Carville is variously estimated at from 300 to 1,500, making a maximum estimate of 2,000 patients for the continental United States. Judging from admissions to the National Leprosarium there is no reason to suppose that the disease is increasing or decreasing. Of 703 patients admitted from 1928 to 1944, 420, or 60 percent, were born in the United States.

In my opinion H. R. 4030 has many good features. There is a great need for a more enlightened public opinion as emphasized in section 101. The contagiousness of the disease is certainly less than that of tuberculosis, yet extreme and harsh measures are often taken in the name of public health when an individual is discovered to have leprosy.

Title II is designed to make treatment more readily available by authorizing the Surgeon General to provide for treatment in Veterans' Administration hospitals, in State, county, and city hospitals and, in certain instances, in the homes of the patients.