

cerning the fundamentals of good nutrition in terms of adequate, well-balanced diets.

A picture of the activities of the past two decades would show industrious scientists in pursuit of new knowledge; health and education departments eager to apply every form of disease prevention proved to be safe and good; and enthusiastic nonofficial lay and professional groups working together to safeguard life and health. And into this picture the Federal Government has recently stepped with financial aid under the Social Security Act of 1935 for public health and welfare activities in the various States.

Thus the young men of 21 to 25 upon whom the hand of the Selective Service Act of 1940 principally falls, have grown to manhood in one of the richest flowering times of medicine and public health. They have had the benefit of the extraordinary progress made in curative and preventive medicine, besides being the objects of a wide-scale program of health guidance and protection which was greatly expanded since or shortly before they were born. No wonder that deep interest attaches to the relative importance of the various causes of disqualification in the two drafts! Never before has it been possible to examine medically a sizable cross-section of two succeeding generations in the civilian population at approximately the same age level, the second generation the beneficiary of efforts initiated by the shortcomings of the first.

At first sight it would appear that we have in the two sets of examinations a clear-cut and concrete check on the success of those efforts. As a matter of fact, this is not so. It is impossible to compare the incomparable. Early indications that more than 40 percent of the men examined under the Selective Service Act of 1940 are being classified as unfit for general military service has tended to give the impression that the health of American youth is inferior today to what it was 20 years ago in spite of all our efforts to improve it. However, neither the situation, the purpose, the means of measuring health status, nor the physical standards are the same today as they were in 1917-1918.

The very progress which has made it possible to give better health protection also enables physicians to give better physical examinations. Diagnostic techniques and instruments and tests for detecting objective signs of defects in structure and function have been vastly improved. The very insistence on the right of youth to be "well born," well nourished, adequately protected against communicable diseases, and free of remediable defects has tended to raise the standards of physical and mental fitness. We have become "allergic" to malnutrition, dental caries, preventable diseases of every description, even though we have not yet found a way to apply universally the known methods of dealing with them. Finally when the Selective Service Act of 1940 was passed we were not at war as we were when conscription was put in force in 1917. There has not been the immediate urgency for man-power that makes expedient the sifting of men through a coarser screen than is used in less hurried times.