

of childhood, (measles, mumps, chickenpox, whooping cough and scarlet fever) also accounted for much sickness; well over a million cases of these diseases were reported during the survey year. In March 1957 there were nearly five thousand persons suffering from such long-term conditions, generally congenital or arising in early childhood, as epilepsy, cerebral spastic infantile paralysis or the late effects of infantile paralysis and there were over 10,000 mentally defective persons receiving allowances for total and permanent disabilities, in addition to those in institutions.

*Health of Adults.*—The health of the adult population has also been affected by modern preventive and treatment services and control of many infectious respiratory and digestive diseases has markedly reduced death rates from these causes. Degenerative diseases, on the other hand, continue to take an increasing toll of life and health through the working years.

Thirty years ago women experienced a higher death rate than men through their reproductive years; the situation is now reversed, with women's death rates reduced by two-thirds and male death rates reduced by one-half. Accidents, frequently occupational, are the leading cause of death for men; past the age of 30 cancer becomes the leading cause of death for women. From age 50 on there are marked trend differences in death rates between the sexes. While the rates for women in their 50's and 60's have dropped by about one-third there has, over the past quarter-century, been no significant decrease in the male death rate; in 1955 there were seven men who died for every four deaths among women in this age range. Half the deaths of both sexes are due to heart disease. One-third of female deaths and one-fifth of male deaths result from cancer. Diabetes also ranks as a leading cause of death for both sexes. Accidents continue to take a heavy toll with higher rates among males.

The Permanent Physical Disability Study carried out as a supplement to the Canadian Sickness Survey in 1951 reported that 317,000 persons aged 45 to 64 were permanently physically handicapped; of this number 136,000 were severely or totally disabled. The high death rate from degenerative diseases in the adult population is preceded in many instances by periods of illness and disability.

*Health of Older People.*—The growing burden of chronic illness in old age is reflected in mortality and morbidity data. In 1955, 63 p.c. of deaths over age 65 were caused by heart and artery diseases; 15.6 p.c. were the result of cancer. Cardiovascular disease and cancer account for approximately one-third of all old age admissions to general hospitals and a large share of hospital care in old age is for respiratory and digestive ailments. The chronic nature of sickness in old age is emphasized by the findings of the Canadian Sickness Survey. Persons over 65 accounted for only 7 p.c. of the survey population but for 15 p.c. of the total days of illness. Much disability was permanent as was indicated by the fact that 162,000 persons over 65 were estimated to be severely or totally disabled. Heart disease, arthritis, impairments from accidents, blindness, deafness and chronic diseases of the nervous system accounted for 60 p.c. of all persons reporting permanent disability. The Canadian Sickness Survey did not include residents of chronic care institutions. In 1955 there were about 140,000 persons under care in mental, tuberculosis and other chronic care hospitals. Persons over 65 years of age accounted for one-quarter of all separations from mental institutions. One-quarter of discharges and two-thirds of deaths in mental institutions in old age were diagnosed as senile or suffering from cerebral arteriosclerosis.

*Health Problems.*—The increasing impact of chronic disease and the continuing high death rates in the productive years of life caused by degenerative diseases, high accident rates, the threat presented by radiation and other hazards to the health of the Canadian as well as other peoples are the subject of increasingly intense research in many countries. Canadian research has made a considerable contribution both in terms of guiding hypotheses and in clinical work. The active participation of Canadian scientists in international research ensures that Canadians are able to benefit quickly and freely