THIS MONTH IN AEROSPACE MEDICINE HISTORY

DECEMBER 1991

Sick call for flight vs. nonflight personnel (III Corps Flight Surgeons Office, Ft. Hood, TX): "Data were collected over a l-year period at an Aviation Troop Medical Clinic (TMC) supporting an aviation brigade consisting of 530 aircrew and 1,220 support personnel. A total of 5,793 sick call visits were made, 73% of which were initial visits, the remainder being second or subsequent visits. Aircrew evaluations accounted for 29% of the total. Major reasons for visits were illness (56%), injury (34%), and supplemental care (10%)...

"Over two-thirds of both initial and return visits were by individuals not on flight status. This corresponds closely to the personnel distribution in the unit utilizing the aviation TMC. A significant difference in patient disposition was observed between the two groups. Most acute injuries and minor illnesses reported in non-flight personnel required initial treatment without follow-up. In contrast, the aeromedical restrictions concerning illness and injury often necessitated a return visit for flight personnel. This is primarily due to the requirement for aircrew to receive medical clearance for return to flight duties following illness and medication use."¹

DECEMBER 1966

A new aircrew cooling suit (Aerospace Medical Research Laboratory, Wright-Patterson Air Force Base, OH): "A water-cooled vest through which icewater [sic] was circulated, was evaluated as a means of reducing thermal strain in aircraft operated in hot humid climates [**Fig. 1**]. In 2 hour exposures to an environment of 46.5 C with a water vapor pressure of 15 mm. Hg, the vest reduced sweat production by 59 per cent. Relative thermal comfort was provided by melting 2 to 3 kg ice per manhour [sic]."³

DECEMBER 1941

Flying during menses (Connecticut Department of Aeronautics): "We know that there exists a definite association between menstruation and the endocrine system and that many endocrinopathies manifest themselves in some form or other of menstrual disorder. We also know that the ductless glands are closely related to the cardiovascular and neurocirculatory systems...

"Since we are primarily concerned with the stability of the female pilot during the menstrual period we must regard her symptoms during the flow as an index of her physical and nervous standards...

"Menstruation... should not be construed as a phenomenon with a decidedly unfavorable background. Contrary to a belief of many, the menstrual period does not indicate the presence of an illness but that of a normal physiologic process. Timeworn is the belief that she should be regarded as a delicate individual during this time...

"From the foregoing facts and statements the reader is invited to exercise his own opinion as to whether or not the female pilot should be allowed to fly during her menstrual period. Inasmuch as some writers have expressed an opinion which would keep



Fig. 1. Water-cooled vest.

female pilots out of the air during their menstrual period, time and further research work will be the only possible factors which will aid in a final decision. The writer is adamant in his personal belief, however, that the female pilot who is healthy and stable in every respect and who is symptom free during the menses is safe to, fly during this period. To regulate or attempt to regulate a woman's flying activities in this connection would be an utter impossibility inasmuch as some women are reluctant to admit their weakness, especially when the admission might result in an interruption in their flying."²

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This column is prepared each month by Walter Dalitsch III, M.D., M.P.H. Most of the articles mentioned here were printed over the years in the official journal of the Aerospace Medical Association. These and other articles are available for download from Mira LibrarySmart via https://submissions.miracd.com/asmaarchive/Login.aspx.

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