pain than other workers.[44] In the absence of any more specific studies on the subject, the validity of these observations appeared difficult to determine.

The only agency to undertake any serious research on the problem was the Army Air Forces, which reported that numbers of women at certain stations in the Florida swamps were all but disabled by menorrhagia. Some study was made of the effect of climate upon menstruation, and of the relative effectiveness of different treatments, but with little conclusion except that the sufferer usually recovered if transferred to a climate or duty to which she was accustomed.[45]

Unfortunately for this solution, previous regulations of The Surgeon General provided that a soldier who was a noneffective at any station would not be transferred to another to secure his recovery, but would be discharged. This regulation had been designed for male patients with asthma and similar complaints, and was intended to prevent the Army from becoming immobilized by too many members who could work only in certain climates or situations. WAC authorities protested its application to menstrual disorders, since badly needed WAC typists and clerks who could have given good permanent service were discharged because of it. Nevertheless, no change was made in the ruling, since The Surgeon General considered it impractical to amend Army Regulations for one type of case.

Another amendment thought desirable by WAC advisers, but never granted by The Surgeon General, was one to allow post surgeons to authorize two hours or a half day in quarters for women with menstrual cramps. These ordinarily abated in the time required for aspirin to take effect, but meanwhile, under Army Regulations, a medical officer was required to commit the woman to a hospital if she was unable immediately to return to work. Since several days were ordinarily required to secure release from a hospital, increased loss of work time resulted. Industrial advisers noted an identical problem:

> Industries can reduce the time lost due to dysmenorrhea by providing a place for the women to rest, hot drinks, local heat, and simple medication. . . . If such provisions are made, many women will be able to return to work after a short period, whereas otherwise they would leave the plant.[46]

The Surgeon General was never willing to authorize any such solution, although reports indicated that some stations had solved this and similar problems by maintaining dispensaries in which any patient might be allowed to rest for a brief period. Such dispensaries, if locally devised, had to be managed through unofficial reallotment of grades, since they were never authorized on any Tables of Organization.

Even without the recommended amendments, the efficiency of the Corps as a whole was not perceptibly affected by menstrual problems. This fact appeared the more remarkable in view of expressed opinions before the war that woman's menstrual function rendered her so "abnormal, unstable," and so on, as entirely to disqualify her for military service. Instead, while individual women had been disqualified for certain duties or for military service, there was no instance in which the sex as a whole had been disqualified for this reason from serving in any particular Army job or in any station,

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[44] Memo, SGO for G–1, 19 Dec 45. SPMC/DF–W, in WDWAC 201.6.

[45] Health files (unnumbered) of Air WAC Div, ACofAS Pers, Hq AAF, 1943–45.

[46] Baetjer, *Women in Industry*.