Surgeon general takes on violence

By GEORGE WILL
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WASHINGTON — With his beard and armor-piercing gaze, Dr. C. Everett Koop resembles an Old Testament prophet who has discovered his neighbors making graven images. Actually, he is not fierce, but is determined to be heard, which is good because that is his job. He is surgeon general of the United States.

The surgeon general's job includes monitoring the health of the American people, publicizing significant findings, and using information to change behavior, as has been done with several reports on smoking. Having saved millions of lives and billions of dollars, the Surgeon General's Office has done more good per dollar spent than any other federal office.

RECENTLY KOOP expanded slightly the scope of his office's monitoring. Speaking to the American Academy of Pediatrics, Koop, a pediatrician, urged physicians generally but pediatricians especially to consider violence as a treatable public-health problem. Statistics show there are periods when there are striking changes in the incidence of violence. We now are in one, which began in the late 1960s. Koop thinks it unlikely that mortality rates from violent acts will return to the levels of the early 1960s.

We have neither the historical distance nor, perhaps, the analytic capability to say what has happened to cause the increased violence. But Koop believes violence is "treatable" in this sense: We know enough about the symptoms of violent personality in children and parents to make diagnostic, predictive and preventative decisions.

CLUES INCLUDE the fact that homicidal children tend to have histories of attempted suicides and of psychomotor seizures. Many have seen or been victims of family violence. Many have mothers who have had in-patient psychiatric care. High-risk families tend to be socially isolated, lacking strong friendships and subject to stress from even such common social transactions as shopping and using public transportation.

Koop wants physicians to be sensitive to the signals of personal and family stress, and to master the growing literature about the predisposition to violence. He believes there should be "the same kind of counseling or referral service as if the patient showed a predisposition to cardiovascular disease, obesity or diabetes." Physicians, he notes, do not hesitate to counsel patients with hypertension to avoid salt or certain sugars. "Similarly, if we have a patient with a predisposition for violent behavior, especially against family members, I think we need to advise that patient to get some professional counseling and also suggest that he or she monitor their entertainment 'menu' and avoid the kinds of television or motion-picture fare that stimulates and contributes to the violence in their personalities."