

MEDICINE

Present War May Bring Conquest Of Influenza

If Conflict Precipitates an Epidemic Like That Of World War, Either Vaccine or Lamp May Subdue It

THE CONQUEST of influenza may come out of the war now raging in Europe, Lieut. Col. A. Parker Hitchens, M.C., professor of public health at the University of Pennsylvania, said at the meeting of the American Public Health Association at Pittsburgh.

The Spanish-American War, he pointed out, gave Walter Reed the opportunity to conquer yellow fever. That war and the World War led to the vaccination and sanitation methods which now keep typhoid fever under control.

Influenza swept the world in a devastating epidemic during the closing years of the World War, and medical and health authorities have stated that it would probably do the same if the war in Europe continues. Col. Hitchens takes a more optimistic view.

Two weapons, a vaccine and a germ-fighting lamp, are ready for trial in the next great influenza epidemic. Either or both of them may emerge from such a trial as a practical means of preventing influenza. At least three institutions in America and one in England have already vaccinated small groups of people. If these groups come through the next great epidemic without having influenza, the value of the vaccines will be shown. The institutions are all guarding their vaccination work as carefully as any general guards his war plans, because they are not ready yet to vaccinate the entire population, even in the event of an epidemic. Under such conditions they could not get the accurate information necessary for a real appraisal of the vaccines. But they are ready and waiting for the results with the groups already vaccinated to show whether the entire population of a nation can be protected against influenza.

The influenza-fighting lamp was described by Prof. William F. Wells and his wife, Dr. Mildred Weeks Wells, of the University of Pennsylvania. The lamp is designed to fight any disease like influenza whose germs travel through the air, by letting down a curtain of ultraviolet rays to keep the germs out of a room and to kill any that may already be

in the room. Similar lamps are being used in many operating rooms throughout the country to keep germs out of open wounds.

Schools and hospitals are already, in a few places, using the Wells lamp to protect children from germs of influenza, measles, and similar infectious diseases. English, French and Canadian medical authorities, hearing about it at the Microbiology Congress in New York recently, are considering use of the lamp in dormitories to protect children, especially where there is crowding due to evacuation of children from London, Paris and other large cities.

Protection of soldiers in barracks from getting influenza is seen by authorities as a possible wartime use of the lamps, although this has not yet been announced by Prof. and Dr. Wells.

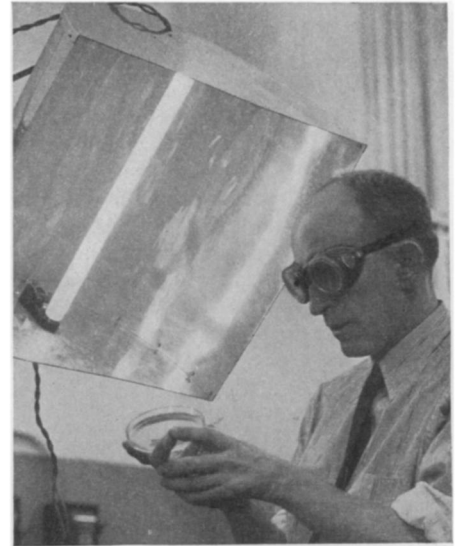
Science News Letter, October 28, 1939

War on Gonorrhoea

AMERICA has declared war, in the nick of time, against gonorrhoea, it appears from discussions of this devastating disease which spreads like syphilis but is not yet so commonly mentioned.

The declaration of war against this disease foe was hailed by Dr. N. A. Nelson of the Massachusetts Department of Public Health in a report to the meeting. Gonorrhoea has been neglected, even though there has for several years been a public drive on syphilis. With powerful weapons such as sulfanilamide and heat treatments for controlling gonorrhoea already at hand, Dr. Nelson sees little excuse for failing to wipe it out.

The war on gonorrhoea has been declared, however, and the timeliness of it is seen by those who, reading news of war in Europe today, remember the world-wide increase in both gonorrhoea and syphilis that followed in the wake of the World War. During that war, army, navy and public health officials were vigorous in their fight to control these diseases. After the war was over, the army and navy officials had no more authority over the discharged soldiers



FLU-FIGHTING LAMP

The rays from this ultraviolet lamp throw down an invisible curtain of protection being used to protect school children from germs. A. H. Young, of the General Electric research laboratory is here demonstrating how the lamp will kill the germs in a petrie dish held near it.

and sailors, and the health officer, Dr. Nelson said, "with a hefty sigh of relief, promptly resigned from the vice squad and returned to the more 'moral' business of controlling those diseases which it is respectable to have."

By starting now to control gonorrhoea and syphilis, health authorities can probably prevent any post-war epidemic wave of these diseases, if such should be on the way.

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New Malaria Menace

A NEW and grave malaria menace has emerged from Egypt, land of Biblical plagues, to worry American health authorities. News of the threatening situation was brought by Dr. Harry Most, of New York University College of Medicine.

The danger is that malignant tertian malaria, affecting the brain and frequently fatal, may spread from uncontrolled drug addicts to the healthy population. Hundreds of cases have been found in drug addicts in New York City alone during the past few years.

The disease spreads among the addicts because of their custom of passing around a hypodermic syringe for injecting the narcotic drug into the veins. The custom emerged from Egypt in 1929 as a new vogue in drug addiction. Since then outbreaks of malignant malaria

have been increasingly numerous among drug addicts, Dr. Most reported. Malaria patients now admitted to Bellevue Hospital, New York, for example, far outnumber those admitted before this new practise became the vogue among drug addicts.

The malaria parasites in the veins of one addict are transmitted via the hypodermic needle and syringe into the veins of addicts previously free from malaria. But the danger is not limited to addicts.

"Attempts to infect mosquitoes, from addicts recovered from the disease, were successful," Dr. Most reported. "It is felt that a large number of addicts partially or improperly treated who are at large, and those untreated likewise at large, constitutes a grave menace to the healthy population, especially in areas where anopheles (malaria-carrying) mosquitoes are abundant."

To attack the problem, Dr. Most suggested a large survey to determine the amount of this type of malaria and a legal set-up permitting proper disposition of infected persons.

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Many Servants Syphilitic

ONE-THIRD of the domestic servants in New York City are syphilitic, if conditions throughout the city are the same as those found in a survey reported by Drs. Sophie Rabinoff and Theodore Rosenthal, of the New York City Health Department. Over 1,000 women were examined through a project carried on by the local Home Relief Bureau. The majority of the group were Negroes.

Almost half of the ones found to be infected were apparently unaware that they had syphilis. Only four patients, 1.2% of the total number found syphilitic, had syphilis in a communicable form. More than 95% of the patients were in the asymptomatic or latent stage of the disease.

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Health Training School

AN INSTITUTION like West Point or the U. S. Naval Academy at Annapolis for training health officers to lead the American army of disease fighters was suggested by Dr. Alan Gregg, director of the Rockefeller Foundation, New York City.

Such an institution or a system of substantial scholarships in the existing schools of public health would, in Dr. Gregg's opinion, make it possible to train

the men and women best suited for the important job of health officer in city, county, state or federal health services.

The present high cost of adequate training for such positions keeps out most young people below the upper middle class income level, Dr. Gregg pointed out. This means that the men and women trained for the job of health officer may not understand the needs of the people they expect to serve.

"How," asks Dr. Gregg, "can we expect understanding of the underprivileged to emerge strong and tenacious and self-respecting among students who have never been underprivileged? We may expect a student to have sympathy of a sentimental sort, but not the sympathy and conviction of understanding born of experience."

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Unsuspected Cancer Danger

DANGER of patients dying of cancer because it is mistaken for syphilis or other venereal diseases against which there is now a nationwide fight was emphasized by Dr. Robert B. Greenblatt, of the University of Georgia School of Medicine.

Cancer of the reproductive organs is often "clothed in the guise of a venereal disease," he warned. Besides this danger of mistaken identity, cancer may occur together with a venereal disease or may be a direct sequel to one of them that has become chronic. Unless this is remembered, there is danger, Dr. Greenblatt believes, that in preoccupation with efforts to stamp out venereal disease, the cancer will be neither recognized nor treated, with dire consequences to the patient.

To avoid such disasters, Dr. Greenblatt recommends that along with blood, Wassermann and other tests for syphilis and venereal diseases, a bit of tissue should be removed for microscopic examination for cancer in any suspicious cases.

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Medical Care Plans Please

MEDICAL care plans with which both physicians and families participating are well pleased, on the whole, have been worked out and put into operation in 25 states by the Farm Security Association, its chief medical officer, Dr. R. C. Williams, of the U. S. Public Health Service, reported.

The FSA medical care program is based on the finding that "a family in

good health was a better credit risk than a family in bad health." The families participating in the program are those "near-relief families" to whom the FSA has loaned money to enable them to continue farming and make a living.

The farm families with incomes from \$20 to \$300 a year obtain medical aid by the pre-payment of \$15 to \$30 a year into a pooled fund. A bonded trustee is in charge of the pooled fund, and he pays all physicians' bills for the group as fully as funds will allow on a monthly, pro rata basis. This is the plan followed in most communities. There are a few variations, chiefly to meet local conditions. The families can go to any doctor they choose who is participating in the plan.

Most of the plans include the following medical benefits: ordinary medical care, including diagnosis and treatment in the home or in the office of the physician; emergency surgery, emergency hospitalization, obstetrical care and ordinary drugs.

Before any plan is established, the state medical association must approve it, Dr. Williams said. The county medical societies then work with the FSA to draw up an agreement for a particular area.

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To Reduce Farm Accidents

A CAMPAIGN to save lives of farmers and their families by reducing accidents on the farms was suggested by Dr. J. N. Baker, Alabama State Health Officer.

In his state, he reported, people on farms have been dying accidental deaths at the rate of 310 a year for the past six years. Farm activities which caused the greatest number of these accidental deaths are: first, cutting and sawing lumber; second, caring for animals; third, plowing. Farm home accidents occurred chiefly when the victims were playing, walking or sleeping.

Burns were the most important type of fatal injury on farms. Falls come second, firearms third, suffocation fourth, and poisoning fifth.

Dr. Baker urged health officers to get more detailed information concerning causes of farm accidents and to get it as soon as possible after the accident, so they will have the information on which to base a campaign against this preventable cause of death.

"We should consider our deaths from farm accidents as preventable and seek to reduce their number by educational programs," he declared.

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