



USEFUL—The hollow "belly" of one of the palms, mounted on a pair of wheels, becomes a very practical tank cart for hauling a farmer's water.

day account of what the two men saw in a season's bumping around on country roads in the interior of Cuba—country that most travellers would consider deadly dull. Much of the territory they traversed would be a sad disappointment to the unprepared visitor of the tropics, for there is no lush, green jungle, no tangle of snake-infested lianas, no exotic orchids. On the contrary, the country is dry, open, grassy or scrubby.

Yet this is just as genuinely the tropics as the stuff in the travel-folder illustrations. And for those prepared to look, there is much to see. There is a great deal of interest, for example, in the ways in which the plants adapt themselves to the more or less arid environment: by fleshy stems in cacti, by succulent leaves in some of the euphorbias, by tough, harsh-textured vegetation.

You even have to dig for your knowledge with a spade, for a surprising number of plants bury their biological treasures under ground to keep them from fierce sun and thirsty air. A wisp of leathery, dark green leaves on wiry stems may be attached to a root or rhizome a couple of feet deep and as thick as your arm.

People from the southeastern United States might be startled at seeing an old friend from home—the Southern liveoak—on the uplands of the western end of the island. This outlier is stated to be the southernmost known station for the liveoak. To give the scene an even more familiar flavor, the oaks are intermixed with pines. They are of an endemic Cuban species.

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species of tick, commonly called the Lone Star tick because of the star shaped marking on its back. The disease was therefore variously dubbed Bullis fever, Lone Star fever, or tick fever.

No guess is hazarded by the Army physicians as to the cause of the disease. But they believe that further laboratory investigation will prove that it is transmitted to man through tick bites.

Since the disease first cropped up last year, cases have been increasing in frequency and severity in the San Antonio area. During May and June 485 patients with symptoms characteristic of the disease were admitted to Brooke General Hospital at Fort Sam Houston.

The disease may be more widely distributed than has been recognized, the physicians point out. Because there will be heavy troop concentrations in rural areas during the war, they believe that the attention of medical officers should be called to the occurrence of this baffling set of symptoms.

In many ways Bullis fever resembles other acute feverish illnesses. Colorado tick fever, dengue fever, malaria, typhus and Rocky Mountain spotted fever were all considered as possible diagnoses and eventually discarded.

Outstanding clinical features include severe headache, inflammation of the lymph glands, unusually low white blood cell count, and high fever ranging from 102 to 105 degrees Fahrenheit. General weakness occurred during the fever stage. Loss of weight was observed in many of the men and convalescence was protracted. In the more severe forms of the disease a fleeting rash appeared early, resembling German measles, and at times typhus, but disappeared within 48 hours.

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MEDICINE

New Disease Attacks

Bullis fever, an unidentified malady which has attacked troops at Fort Sam Houston, Texas, is increasing in frequency and severity.

➤ **BULLIS FEVER**, a new, unidentified disease that has attacked troops at Fort Sam Houston, Texas, is believed described in the medical literature for the first time (*Journal, American Medical Association*, Aug. 21).

Col. John C. Woodland, Maj. Mordecai M. McDowell and Capt. John T.

Richards, Medical Corps, Army of the U. S., report that the mystifying set of symptoms was first noticed in a group of acutely ill soldiers who had been on maneuvers at Camp Bullis, a military reservation about 20 miles west of Fort Sam Houston.

All of the cases had been bitten by a

MEDICINE

Black Eye Camouflaged By New Preparation

➤ A QUICK, easy method to camouflage that black eye is offered by Dr. H. Goodman of New York, (*Pennsylvania Medical Journal*, June).

He prescribes a preparation of bismuth subnitrate suitably colored with carmine and calamine to match your skin. Soap and water cleaning of the discolored area, a layer of glycerin, then the powder and you can go home without embarrassment.

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