fore the central nervous system had become infected.

The success of the treatment varied with the total amount of the drug administered, but it was estimated that more than 90% of the early cases can be cured within a period of one week if the standard total dosage set by this experiment is used. Treatment with other drugs may have to continue for as long as 12 to 15 weeks, according to some published reports.

Doctors administering the new drug to natives found also that injections into the muscles of the patients proved to be as effective in treating the disease as the previous method of injection into a vein.

Mass treatment of sleeping sickness patients throughout tropical Africa may be simplified even more when the studies now in progress of the treatment of more advanced cases are reported.

Science News Letter, August 17, 1946

PHYSIOLOGY

Living 29,000 Feet Up

➤ TWO NAVY volunteers lived without supplemental oxygen for 30 minutes in conditions simulating an altitude of 29,025 feet while doctors kept valuable records on living in high altitudes, Commodore J. C. Adams, chief of the division of aviation medicine of the Navy's Bureau of Medicine and Surgery, announced.

Lt. (jg) Walter S. McNutt, Jr., Jefferson, Texas, and hospital apprentice Carlton R. Morris, Farmerville, La., actually were in a 10 x 10 foot pressure chamber at the Naval Air Station, Pensacola, Fla., when they "climbed" 23 feet higher than Mt. Everest. The atmospheric conditions in the room were those of a higher altitude than man has ever before survived without added oxygen.

The experiment, dubbed "Operation Everest," built up the simulated altitude from sea level conditions to the record height in 32 days and tested the adaptation of the human body to anoxia, the decreasing supply of oxygen encountered at high altitudes. Two other volunteers, hospital apprentice Earl D. Wilkins, Jr., Dorchester, Mass., and pharmacist's mate Horace C. Hertel, The Dalles, Ore., blacked out after the conditions went above 27,000 feet. They were revived with additional oxygen.

After living at the record altitude conditions for half an hour on July 30, the "high living" volunteers were given oxygen and pressures were lowered to simulate 50,000 feet. The chamber was gradually returned to sea level conditions at the end of the operation.

Mt. Everest, for which the high-altitude experiment was named, rises 29,002 feet above sea level in the Himalaya Mountains in northern India, and no climbers have ever reached its peak, the highest in the world.

Terming the experiment "a new chapter in altitude physiology," Commodore Adams pointed out that this study is the first scientific record of effects on the human body of conditions at such high altitudes for any length of time.

Careful records were kept of the men's temperatures, blood pressures and weights during the experiment and special devices recorded their heartbeats as they slept at night.

Recreation for the "guinea pig" volunteers in the more-than-a-month of living in the pressure chamber included reading books on mountain climbing.

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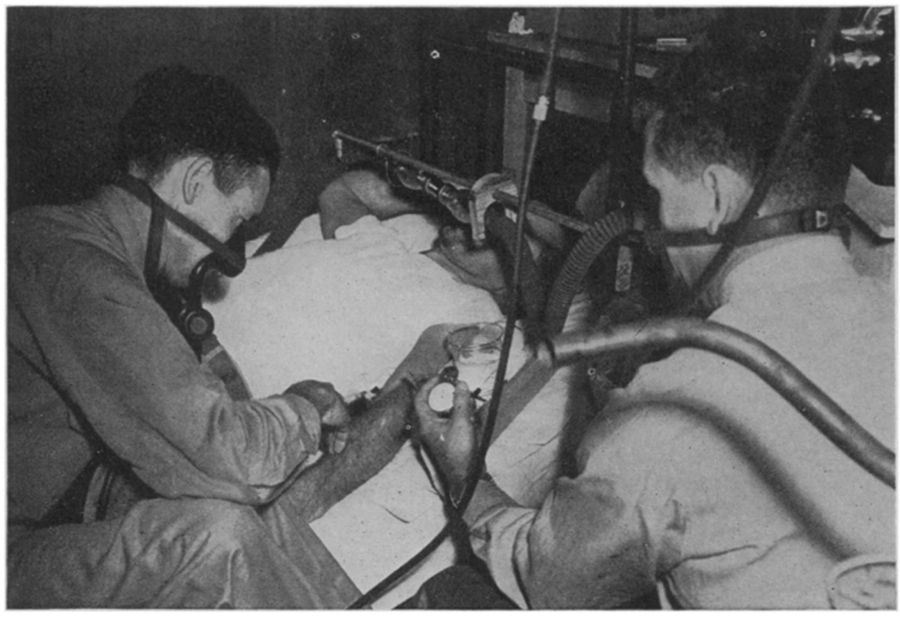

FLYING HIGH—Respiration is being checked on volunteer for Operation Everest, Navy's experiment to test adaptation of the human body to anoxia, the decreasing supply of oxygen encountered at high altitudes. Both doctors wore oxygen masks while in the altitude chamber.

MEDICINE

Report First Adult Survivor of Rare Disease

➤ A "UNIQUE" case in medical history, the first adult known to have survived an attack of the rare disease, toxoplasmosis, is reported by Dr. Jerome T. Syverton and Dr. Howard B. Slavin, of the University of Rochester, N. Y., School of Medicine and Dentistry, in the *Journal of the American Medical Association* (July 27).

Only one other patient, a child, is known to have survived this ailment. The germ that causes the disease is a large one-celled parasite called toxoplasma. The disease itself was unknown to medical scientists before 1939. Since then, only 35 cases have been reported, three of them in adults.

The case reported by the Rochester doctors was discovered by accident. While most of the previously reported cases showed signs of brain injury or of inflammation of the membranes covering the brain, the Rochester patient had symptoms more like those of typhoid fever or some other intestinal infection.

Blood tests and the course of the disease led the doctors to suspect trichinosis, so they cut out a tiny piece of a leg muscle and examined it under the microscope. Instead of finding the worm that causes trichinosis coiled in a cyst in the muscle, they found toxoplasma organisms.

Science News Letter, August 17, 1946