

MEDICINE

Treat Death-Causing Ills

Patients with diseases which are a leading cause of death in the nation will receive treatment at the new clinical center in Maryland when it is erected.

► IF THREE YEARS or so from now you have a baffling kind of heart disease, cancer or mental illness for which no cure has meanwhile been discovered, you may find yourself on the way to Bethesda, Md., suburb of the nation's capital, for study and treatment.

Because in about three years the U. S. Public Health Service expects to have completed here its 13-story brick hospital and research laboratory building, to be known as the clinical center of the National Institutes of Health.

The 500 patients of the hospital will be a select group. Select because they have an illness which is a leading cause of death or disability or both in the nation at that time. Right now, heart disease, cancer, mental illness and some tropical diseases are the ones slated for study. But, as Dr. Leonard A. Scheele, Surgeon General of the U. S. Public Health Service, put it in announcing plans for the clinical center:

"If anyone cracks the cancer problem before the center is completed, we won't take any cancer patients. We will devote our efforts to some other unsolved disease problem of public health importance."

The building, as now planned, will house the National Institute of Mental Health and hospital facilities of the National Cancer Institute, the National Heart Institute and the National Institute of Dental Research. The hospital part of the building will be its smallest part, since the object of the center is research leading to improved treatment.

Patients while under study, however, will have the highest quality of medical care with the most modern facilities. They will come from all parts of the country, when referred by their doctors, hospitals and other health agencies on the basis of problems under study at the center at the time.

Whether patients who are able to pay will do so, perhaps through contributions to one of the National Institutes, or whether all care and treatment will be free has not yet been determined.

An efficient, smoothly performing professional staff will be ready as soon as the building is completed. "Colonies" of physicians and other medical researchers are already working together at Public Health Service and other institutions throughout the country, readying themselves and their skills for work at the center when it opens. In addition to the physicians and researchers, a staff of some 1,500 nurses, dietitians, orderlies and kitchen workers is planned.

Housing accommodations for patients' relatives and for patients returning for follow-up study a year after treatment are

included in present plans. An apartment hotel on the center's grounds will be built for them, if housing facilities in Washington are still overtaxed three years from now.

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Anti-Allergy Drug Aids Shaking Palsy Patients

► BENADRYL, medicine which has brought relief to many a sufferer from hay fever and hives, now is helping patients with shaking palsy, known medically as paralysis agitans or Parkinson's disease.

Its successful use in ten patients is reported by Dr. Joseph Budnitz of Pittsfield, Mass., in the *New England Journal of Medicine* (June 17).

The drug is not reported as a cure for the condition, and Dr. Budnitz points out that the "good results obtained in this small

group may not withstand the test of larger series of cases."

All the patients, however, "noted considerable improvement in symptoms" as long as they continued to take the drug.

A 68-year-old man, sick for four years, with such palsied, trembling muscles that he could not feed or dress himself and had to be helped out of a chair is now, three months after starting benadryl, leading a normal business and social life. Within seven days after starting the treatment, he was able to get out of a chair alone, dress himself and use a knife and fork and could sit for one hour without tremor.

Patients who previously could only take a few shuffling steps were able to walk farther and lost the shuffling gait. Those who had been kept awake by muscle cramps at night found themselves able to sleep all night.

Four of the ten patients had to go on taking drugs like atropine or belladonna with the benadryl. The benadryl and the atropine seemed to reinforce each other's effect on the patient's symptoms.

Dr. Budnitz suggests that benadryl's effect may be due to its atropine-like action, or it may be due to enhancement of circulation of the part of the brain where the symptoms of paralysis agitans are initiated. A closely related drug, pyribenzamine, also used in hay fever, did not help the paralysis agitans patients.

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DIRECT READING GAUGE—Designed for use with the Martin 2-0-2's fast new under-wing fueling system, this gauge pulls down from inside the rubber fuel cell. A small ball, punctured with holes, on top of the gauge permits the fuel to trickle through the cylinder and drip out when the gauge reaches the level of gas in the cell. By reading the level at which it begins to drip, the mechanic can determine the fuel content.