MEDICINE

Remarkable Recoveries Cited For Kenny Polio Treatment

Reports of Two Groups of 26 and 28 Patients Show New Method Produces Very Satisfactory Results

FURTHER verification that the Kenny method is the best known treatment for acute infantile paralysis, and evidence that it offers a real hope in this crippling disease, is recorded in the Journal of the American Medical Association (April 25).

Devised by the Australian nurse, Miss Elizabeth Kenny, and recently introduced by her in this country, the new treatment has been accepted by the National Foundation for Infantile Paralysis, and in effect, by the American Medical Association.

An editorial in the *Journal* states that "the advances which have been made give assurance of greater preparedness on the part of the medical profession in meeting any outbreaks of the disease which may arise in 1942."

In the Journal are reported two new series of cases where Miss Kenny's technique of moist heat and careful exercise gave incomparably better results than the orthodox use of splints and braces in the acute and subacute stages where muscle spasm is present.

The first series is described by Dr. John F. Pohl of Minneapolis, 26 of whose patients were treated under direct advice of Miss Kenny. Dr. Pohl concludes in part that:

"At the end of eighteen months after beginning the Kenny treatment of a series of 26 patients in the acute and subacute stages it can be stated that these patients have all made a far more satisfactory recovery than they would have made by any previously known method. No deformities have occurred, in spite of the complete omission of splinting."

Dr. Pohl recommends that the treatment be immediately adopted as the fundamental treatment of anterior infantile paralysis.

From the Willard Parker Hospital in New York a report of 28 patients who received the Kenny treatment under Dr. Mary M. I. Daly, Dr. Jerome Greenbaum, Dr. Edward T. Reilly, Dr. Alvah M. Weiss and Dr. Philip M. Stimson, supports Dr. Pohl's conclusions. They too

recommend the new technique "for patients presenting symptoms of spasm, weakness and paralysis in the acute stage of infantile paralysis."

In the New York hospital, patients who received the Kenny treatment are

reported to be "better off in comfort, freedom from atrophy and deformity, rapidity of recovery and possibly in extent of recovery" than those treated in the orthodox manner of splints and braces.

The Journal devotes a special editorial to progress in the field of poliomyelitis, commenting that "step by step the battle . . . is being won. The information that has been gained on the nature of the virus and methods of its transfer has been notably extended during the past year. The contributions of physiologists, neuro-surgeons and physical therapists help to overcome the ravages of the disease."

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AGRICULTURE

Peru Is Now Enjoying War Flax-Raising Boom

PERU is enjoying a war-born boom in flax, a new crop for the South American republic. Starting with an experimental hundred acres or so only three years ago, Peruvian planters jumped the acreage to 35,000 for the crop now being prepared for market. Most of Peru's flax will be bought in this country, partly replacing the European imports cut off by the war.

A survey of the new Peruvian flax industry has been brought back to the U. S. Department of Agriculture by Dr. B. B. Robinson of the Bureau of Plant Industry, who recently returned from a tour of the West Coast countries of South America, as a member of a scientific mission studying plant resources of possible use in the joint defense efforts of the Americas.

Peru seems to be exceedingly well adapted for the raising of flax, Dr. Robinson states. Constant sunshine over rich soil, with plenty of water for irrigation leaves the planter nothing to wish for. Flax responds by growing tremendously—six-foot stalks are not at all uncommon.

Techniques for harvesting and handling the flax are still crude, but experience is already indicating the way to improvements, with increased use of machinery. Present scarcity makes it advisable to produce all the flax possible, without waiting for the development of better methods. In fact, Dr. Robinson states, there is a tendency to go through

the typical boom-crop cycle and plant as great an acreage as can be seeded, regardless of the prospect of collapse that may occur in post-war readjustment days when the return of European flax sources to the market, together with other factors, can be expected to cause a steep drop in prices.

A curious archaeological discovery was made on one large hacienda, in the course of digging a retting pit for the flax. (Flax is processed by retting, or soaking in water for two or three weeks, to permit the connective tissues of the stalk to decay and free the fiber.) Several feet under ground, a big copper tank, nine feet long, three feet wide and three feet high, bearing a sixteenth-century date, was found. Some years ago, another big copper tank shaped like a soupbowl was found in the same neighborhood. Nobody knows what they were used for.

Elsewhere in his travels, Dr. Robinson studied the growing of hemp in Chile and the harvesting of kapok in Ecuador. Chilean hemp has always had its principal market in England, but some of the crop will now be sent to this country. Regrettably the 1941 crop of kapok, the lighter-than-thistledown fluff used in lifepreservers and pillows, was an almost total failure, due to unfavorable weather when the trees were in blossom.

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About 14 pounds of manganese are needed to produce a ton of steel.