MEDICINE

Two Kinds of Jaundice

One virus, called IH, causes infectious hepatitis and the other virus, SH, causes homologous serum hepatitis. Each is contracted in a different way.

➤ A MYSTERY about yellow jaundice, skin-coloring and liver-attacking disease of fighting men and children alike, has been solved by the discovery that there are actually two kinds of the disease.

Two kinds of virus, one IH (infectious hepatitis) and the other SH (homologous serum hepatitis), were announced and described to the International Congress on Tropical Medicine and Malaria meeting in Washington by Dr. John R. Neefee of the University of Pennsylvania Medical School.

Jaundice worried the Army greatly during the early days of the war when it attacked large numbers of our troops who had been vaccinated against yellow fever. The worst worry, that the men had gotten yellow fever from the vaccine, was soon relieved. It was not yellow fever and the stuff in the vaccine that gave them the jaundice was eliminated from further batches of vaccine.

But jaundice continued to take a serious toll among the armed services of many nations during the war. It broke out in a summer camp for boys and girls in Pennsylvania after the war. It had plagued civilian populations for years. The puzzles of what it was and how you got it and how to stop it continued.

The jaundice itself, which is the yellow color of skin and eye whites, is only a symptom. The underlying condition is a liver inflammation, called hepatitis.

With the discovery that there are two viruses, each causing a different kind of jaundice, the puzzles are partly solved. One virus, called IH, causes infectious hepatitis. This jaundice sickness starts within 15 to 37 days after the virus gets into the body. It develops suddenly, with fever and other sharp clinical signs before laboratory tests show the presence of the infection.

The other virus is called SH. The jaundice it causes is named homologous serum hepatitis. This disease does not develop until 60 to 135 days after the virus has gotten into the body. And when it does develop, it comes on slowly, without fever, and laboratory signs come before the symptoms of the disease.

Both viruses cause hepatitis when injected into the body. But only virus IH causes disease when it gets into the body by the mouth, being swallowed in food or water. Immune serum protected against virus IH but not against virus SH, Dr. Neefee found from his studies with human volunteers. Getting IH hepatitis, however, does not protect against an attack of SH hepatitis, nor does an attack of SH protect against IH.

Once started, an attack of IH hepatitis is much like one of SH. This had led doctors to think they were dealing with just one disease. But it was hard to see how a disease that could break out in an epidemic in a children's camp could also attack a grown-up thousands of

miles away who had never had any contact with any jaundice patient. The answer, Dr. Neefee's studies show, is that the children had one kind of hepatitis, and the grown-up had a different kind caused by a different virus and contracted in a different way.

The IH disease apparently can be spread like typhoid fever, from food, milk, water or other things sometimes put in the mouth such as pencils, if they are contaminated with the virus.

Since both viruses get into the blood of the patient, they might be spread by biting insects. No evidence that they are, however, has yet been discovered.

Dr. Neefee cautioned against the dangers of transmitting both these diseases in injections involving transfer of blood or its products from person to person. He pointed out also the risk of using improperly sterilized needles or syringes as a source of infection. Hepatitis viruses have survived heating to 56 degrees Centigrade (138 degrees Fahrenheit) for periods of 30 to 60 minutes.

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PUBLIC HEALTH

Battle Alcoholic Problem

A "HANDS across the continent venture" for battling the problems of alcohol will get started this summer when the Yale Institute of Alcohol Studies in the Southwest is established.

The joint attack by Connecticut and Texas educational and scientific leaders was formally inaugurated at a two-day celebration at Fort Worth, Texas, May 14 and 15.

Plans for the establishment by Yale University of a large, long-range research and clinical center in cooperation with Texas Christian University were announced by Dr. Howard W. Haggard, director of the Yale Laboratory of Applied Physiology.

As now planned, the Yale Institute of Alcohol Studies in the Southwest will comprise the following activities:

- 1. A research unit in the social sciences at Texas Christian University.
- 2. A clinic for the rehabilitation of alcoholics at Dallas.
- 3. A summer School of Alcohol Studies at Trinity University, San Antonio. This will be patterned after the nationally famous summer school conducted each year in New Haven by Yale.
- 4. Informal educational activities, at all levels, throughout the state.

The clinic in Dallas, Texas, under the

direction of a psychiatrist who has specialized in the treatment of alcoholism, will conduct research on physiological sensitivity to alcohol, psychological factors contributing to alcoholism, preventive mental hygiene and tests of new methods of treatments. All work will be carried out in cooperation with medical institutions which will receive grants from the Yale Institute.

The clinic will maintain in-patient and out-patient services, will accept referrals from all sources and will offer its services particularly to the police courts in order to replace admittedly useless penal methods by clinical treatment. It will seek to use all community resources in the care and treatment of alcoholics. One of its most important functions will be the training of clinical personnel to meet the great demand for specialists.

The research unit in the social sciences will consider: methods of alcohol education in schools; investigation of social, economic, educational and religious factors which may be used in the prevention of inebriety; determination of the extent and intensity and nature of alcoholism in Texas and the Southwest in various age groups, occupations, rural and urban areas; a survey of the effectiveness of liquor control laws.

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