


Medical Matters.

THE PLAGUE.



MR. CANTLIE, the well known authority on Tropical Diseases, points out that the advent of the hot weather in India has not been attended by the decline in the number of plague cases and deaths that so many hoped for. There is now known to be no scientific reason for the disappearance of plague in hot weather and its reappearance in the cold season. The recrudescence of plague is dependent upon conditions pretty well apart from meteorological influences. Although reappearing in Bombay for the most part in the winter, plague has prevailed in a virulent form in the adjacent city of Poona during the height of the hot season. In India the infection is now widespread, and in all three Presidencies plague is or has been epidemic within the last few years. The Madras Presidency has escaped most lightly; Bombay has suffered for four years, and quite recently the Bengal Presidency seems to have been seriously attacked by plague. In Calcutta, where plague prevailed in a more or less sporadic form for twelve months, the disease has increased in virulence, and the number of deaths actually exceed those in Bombay, amounting to over 100 daily. At Patna, the disease is very prevalent, and in villages near Agra and Aligarh cases have been reported during the week ending April 23rd. It would appear, indeed, as if the most densely populated part of India, Lower Bengal, was threatened from all sides with plague. The natives have a belief that plague cannot thrive in alluvial soil and, therefore, that Lower Bengal will be exempt from plague. It is to be hoped this is a fact, but there is no evidence such is the case; and it seems more likely that, wherever the rat can live, there plague is possible. Australia seems threatened with an epidemic of plague. Over 130 cases have occurred in the city of Sydney, and some 48 deaths have resulted from the disease; and a report has been sent abroad that plague-infected rats have been found in Melbourne and Brisbane, and in New Zealand at Auckland. The statement, if true, betokens a plague outbreak in the immediate future. Again is Europe threatened by the way of the Red Sea. The Egyptian authorities, with commendable alacrity, have unearthed the fact that plague exists on the Arabian shore of the Red

Sea, and they are imposing strict quarantine regulations upon all pilgrims entering or leaving the country. The importance of a well constituted sanitary service in Egypt is of the utmost importance to Europe, and it is satisfactory to note that the steps taken by the quarantine board in Egypt are excellent.

DISEASE IN SOUTH AFRICA.

Enteric and dysentery, but more especially the former, the *Medical Times* points out, are the diseases responsible for the mortality amongst the soldiers of our army in South Africa. Occasionally is the word "enteric" varied by "typhoid," and one is apt to ask the cause of the interpolation. They are, however, almost solely "bowel" complaints that prevail, and the sanitary conditions of the country fully explain the circumstance. The Boer is primitive in sanitary, as in other notions, and the consequence of both public and domestic insanitation causes serious danger to the community, both civil and military. The dust storms which occur so frequently impregnate not only the water and food but the air also, with material which, from its infected condition, is calculated to become a source of disease. The typhoid protective inoculations are reported to be ineffectual, but until we have exact data to go upon, it is not possible to come to a conclusion as to their efficacy. Before condemning them, however, it is necessary to be positive that it is really typhoid that we are dealing with. The persistency of tropical practitioners in the use of the word "enteric" instead of "typhoid," has, perhaps, more in it than a mere name, and it is open to question if the diseases indicated by these names are identical. Clinical evidence will, no doubt, be forthcoming, and it is unfair to condemn typhoid inoculation until we have positive proof that the prevalent cause of illness amongst the troops is really typhoid.

MALARIAL EXPERIMENTS.

In May, an experiment of a practical nature is to be tried in one of the most malarial parts of the Campagna. Dr. Sawbon and Dr. Low have volunteered to live in a mosquito-protected dwelling during the four months when malaria is most prevalent in that ill-favoured district. Professor Celli has already attempted protection of the kind for some of the Italian dwellers in the Campagna, and with gratifying results. A party of medical men from England, during a visit to Rome, in January of this year, witnessed the good results of Celli's work.

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