

**Medical Matters.****SOME PROBLEMS OF TROPICAL MEDICINE.\****(Continued from page 292.)***THE DESTRUCTION OF THE MOSQUITO.**

EVEN in its present state of development the new doctrine of malarial fever is such that no conscientious administrator could take the responsibility of ignoring it.

In the West African coast it must now be reckoned with at every step. Hospital management must be fundamentally affected by it. Wards will have to be painted of a colour that will facilitate the discovery of mosquitos; and probably some of them will have to be furnished for fever patients with doors and windows of gauze wire netting. Every bed, without distinction, will have to be provided with a fine muslin mosquito net. All water tanks must be supplied with wire net coverings to prevent the ingress of mosquitos. Wells and reservoirs and flower pots will have to be similarly protected. In hospital discipline it will be considered a serious offence to allow a fever patient to be bitten by a mosquito. All mosquito breeding places near a hospital or other dwelling will have to be made unfit for these insects, as far as this is practicable. Much attention will have to be given to the teaching of the new doctrine. All hospital nurses must obtain a mastery of the subject; and so, of course, must sanitary inspectors, otherwise they will be unfit for their posts. But the general public also must have the leading lines of malaria genesis put before them in a way they can understand. It should form a subject of tuition in all the public schools of a place like Lagos, and prizes should be given to the best scholars in the malaria class. The nervous individual that does not know one genus of mosquito from another will, in future, lead an unenviable life in the tropics. Ladies that understand the mosquito theory will not dine in low evening dresses; nor will gentlemen sup with their ankles under the table and covered only by black thin silk socks.

The steps mentioned above, and many others like them, are very obvious, and seem very simple in theory. I regret that I cannot completely share the rosy optimism of our leaders and teachers in this matter. I do not overlook the fact that malaria has been practically ex-

tinguished in this country, which is not congenial to it for reasons of meteorology. Malaria in the tropics is much more difficult to deal with than typhoid, rabies, or small-pox here, and those are not yet vanquished. It is to be feared that in a country like Lagos, when all that can be done shall have been accomplished there, the results may be somewhat disappointing.

**TEXAS FEVER.**

In British New Guinea we never doubted that the horse and dog suffered from malaria, but this part of the problem seems to be solved by the experiments of Koch, which show that even the fever parasites of man and of the anthropoid apes are different and not transferable from one to the other.

Although the specific nature of the human parasite seems thus proved, it still leaves open for investigation on the West Coast of Africa a cognate question of great social and economic importance, to which I venture to invite your special attention—namely, that of the disease that makes it so difficult to keep a horse alive in the forest country near the coast. I do not scruple to suggest that you should investigate this equine malady or maladies, for two reasons. In the first place, it is of very great importance; and, in the second place, if medical men do not examine it, it is not probable that any other competent person will do so. I for one shall be surprised if it is not found that the disease is a parasitic one, though poison has been often suspected. Could I find the money, I should be prepared to advise the Secretary of State to offer a handsome prize to whomsoever should discover the means of rendering horses immune to this fatal disease. My fellow-administrators are enterprising men, and something may yet be done in this direction by combination.

Koch is convinced that a practical inoculation against Texas fever can be arrived at. This and his observations on the Surrakrankheit, coupled with the observations of Smith and Kilborne, are sufficient to justify any such expenditure as that proposed, showing as they do that certain breeds of animals are already immune to the tsetse malady and to Texas fever.

**CANCER.**

In some of these new countries there are interesting points to note with regard to cancer. I do not remember to have ever operated on a Polynesian or Melanesian for cancer though I had to do so several times on Europeans in

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