it will be hung in the Fishmongers' Hall which already possesses notable treasures.

#### INTERNATIONAL COUNCIL OF NURSES with which is associated the FLORENCE NIGHTINGALE INTERNATIONAL FOUNDATION.

# MONTHLY NEWS LETTER, 31st March, 1955.

### **Important News Item !**

ALL THOSE WHO attended as delegates the meeting of the I.C.N. Grand Council in Brazil in 1953 will remember that much stress was laid at that meeting on the necessity for more adequate accommodation for I.C.N. and F.N.I.F. Headquarters. This conclusion was reached as a result of various Reports which were presented, all of which gave evidence of the need for additional staff in order further to develop the already rapidly expanding I.C.N./F.N.I.F. programme of activities. Since 1953, therefore, considerable thought has been given to this matter; and much time expended on viewing and negotiating for various prospective properties but until recently without success.

We are glad therefore to be able to report that the I.C.N. has now been fortunate in obtaining a 57-year lease of a building in Westminster (which is a most pleasing and central part of London), to which we shall hope to move our Headquarters later this year. The house, which is newly built, was originally intended for residential purposes, but is very suitable for use as offices, and will require the minimum amount of work to be done (mainly this will consist of the removal of bath-room and kitchen fittings). A later announcement will be made giving details of the new accommodation as well as the exact date of the move and our future address. Meanwhile, we are still to be found at 19 Queen's Gate until further notice!

#### Travel.

On April 14th, the Executive Secretary will leave London for Wellington, New Zealand, to attend, by invitation, a Conference being held there from April 20th to 23rd in celebration of the Fiftieth Anniversary of the first New Zealand Registered Nurses' Association. Following the Conference, she is to visit a number of other cities where she will address Branch meetings; and on May 5th will fly to Melbourne, Australia, to attend a Congress (inter-national in character) being held from May 8th to 13th inclusive. Nurses have been invited to participate in this Congress from all countries in the Pacific area; and at the Opening Session on May 8th the proceedings will be formally opened by the Governor-General of Australia. Later the Executive Secretary will fly to Brisbane and Sydney; and hopes to pay brief visits (by invitation) to the nurses of Syria and Iran on her way back to London.

The Executive Secretary expects to be back at Headquarters by June 1st in time to assist with the final arrangements for the meetings of the Board of Directors.

# Meetings of the Board of Directors.

As has been formally announced to the Presidents of all our National Member Associations (by letter and Formal Notice sent out from I.C.N. Headquarters on January 26th, 1955) the next meeting of the I.C.N. Board of Directors will be held in Istanbul, Turkey, from August 29th to September 3rd, 1955. The place of the meetings will be the new Hilton Hotel, where accommodation for all delegates, as well as for the meetings, is being generously provided by the Turkish Red Crescent. All our Honorary Officers have stated that they will be able to attend the meetings, and the Presidents of 18 of our Member Associations have so far notified us that they will be present or will be sending a proxy. We hope also that many of the Executive Secretaries will also be able to attend, for their knowledge of the day-to-day affairs of the National Associations is a valuable asset.

# The Facts About Poliomyelitis.

# World Health Organisation Monograph Reviews Present Knowledge.\*

THE WIDE FIELD of present knowledge about poliomyelitis World Health Organisation. The monograph contains papers written by 17 of the world's leading authorities on polio† from seven different countries and covering the history of the disease, its different forms, its treatment and its control. The facts presented are of interest to the general public as well as to the medical profession.

#### Polio is World-wide.

Polio occurs throughout the world and every human being is sooner or later subject to infection by one or another of the three known types of polio virus—"Brunhilde," "Lansing" and "Leon." These viruses are unbelievably small, measuring between 10 and 30 millionths of a millemetre.

Infection by the polio virus takes a number of forms varying from a non-apparent infection to severe paralytic illness. Indeed it is only in a very small number of cases that the infection develops into the acute and easily recognisable paralytic form of the disease.

When a person becomes infected by the polio virus, even though he may not show any outward signs of disease, he develops poliomyelitis antibodies which give him immunity against further attacks. In the economically less-developed countries, this immunity is acquired at an early age, and the more serious forms of the disease are then rare. In the more developed countries, immunity is acquired at increasingly later ages depending on higher standards of hygiene and living conditions, and the paralytic form of the disease then occurs with greater frequency. This results in a paradoxical situation which was certainly not foreseen by the early pioneers of good sanitation. The relationship between serious cases of polio and high living standards has given polio the reputation of being a "rich man's disease." Similarly polio appears more in the country than in the town because country children are less exposed to infection resulting from the crowded conditions of town life, and therefore have less chance of acquiring immunity.

The paralytic form of the disease is the exception rather than the rule, and strikes principally those who have not acquired immunity, or a sufficient degree of immunity.

The efforts of an army of research workers are at present directed therefore towards finding a vaccine which will be able to give everybody immunity from the earliest age.

### The First Known Epidemic—at Saint Helena.

It was not until the late eighteenth and early nineteenth centuries that poliomyelitis (then called infantile paralysis because it attacked only very young children) began to attract the attention of physicians who regarded it as due to "teeth-ing," "foul bowels," or a "fever," and responsible for deforma-tions such as "club-foot."

The first indication of anything resembling an epidemic came from the Island of Saint Helena in 1836. Outbreaks followed in Norway in 1868, France and Sweden in 1880, the northeast section of the U.S.A. in the 1890s and the south-east section about 1910.

\* World Health Organisation : Monograph Series, No. 26. 408 pp. Price £2, \$8, Sw. fr. 24.

\$8, Sw. fr. 24. † Professor Robert Debre, Faculty of Medicine, Paris; Dr. Darline Duncan, Hospital for Sick Children, Toronto, Canada; Professor John F. Enders, Harvard Medical School, U.S.A. – Mobel Prize; Mathieu Jean Freyche, WHO; Professor Sven Gard, School of Medicine, Stockholm, Sweden; Dr. James H. S. Gear, Laboratories of Poliomyelitis Research, Johannesburg, Union of South Africa; Professor W. McD. Hammon, University of Pittsburg, U.S.A.; Dr. Hilary Koprowski, Pearl River, New York, U.S.A.; Professor H. C. A. Lassen, Univer-sity of Copenhagen, Denmark; Johannes Nielsen, WHO; Dr. A. J. Rhodes, Hospital for Sick Children, Toronto, Canada; Dr. W. Ritchie Russell, Oxford, Great Britain; Professor A. B. Sabin, University of Concinnati, U.S.A.; Professor Stephane Thieffry, Faculty of Medicine, Paris; Dr. W. Wood, University of Toronto, Canada.



