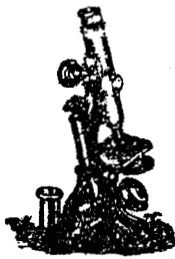


tration Question, and the Hon. Officers will find themselves in a very tight place—between the anti-registrationists or coercionists on the one hand, and the registrationists or free women, of which the nursing profession is now largely composed, on the other.

The situation has its comic side, discreditable as it is. Imagine these reactionary little people stemming the flood of modern progress! Valiant obstructionists! One can only pity their absurdity.

Medical Matters.



SLEEPING SICKNESS IN UGANDA.

Captain E. D. W. Greig, I.M.S., as reported in the *British Medical Journal*, recently read a paper on "Sleeping Sickness in Uganda" by invitation of the Edinburgh Medico-Chirurgical Society. He first dealt with the work of the Sleeping Sickness Commission of the Royal Society, of which he was a member. It was pointed out that the honour of discovering the etiology of sleeping sickness belonged to Colonel David Bruce, and not to Dr. Castellani. Captain Greig then dealt with the main clinical and pathological features of the disease, which was at first mainly a polyadenitis. This phase might last for years, but sooner or later the last stage was reached, when in addition to the enlargement of the lymphatic glands there were signs and symptoms of involvement of the nervous system. The method of recognising the disease in its earliest stages, by recovering the parasite from the enlarged glands by puncture, first described by Drs. Greig and Gray, was mentioned. The ulcerated condition of the mucous membrane of the stomach, as noted by the same observers, was also described. The result of the investigations of the Commission proved that the sole cause of sleeping sickness is the *Trypanosoma gambiense*. It had also been proved that the disease was conveyed from the sick to the healthy by a species of tsetse fly, the *Glossina palpalis*, and possibly that it might also be conveyed by other varieties of *Glossina*. They showed that in Uganda the distribution of sleeping sickness and that of *Glossina palpalis* practically coincided. They further proved that the flies caught in the neighbourhood of the huts of patients suffering from sleeping sickness harboured the

Trypanosoma gambiense, and were capable of infecting animals. The Commission (Drs. Gray and Tulloch) had further shown that an enormous multiplication of the parasite took place in the alimentary canal of *Glossina palpalis* which had been infected. In about 10 per cent. of the flies caught near the houses of sleeping sickness patients the alimentary tracts contained a very large number of trypanosomes. The life-history of *Glossina palpalis* was described. A short account was also given of Captain Greig's investigations on the distribution of the fly and sleeping sickness in the Nile valley. The fly was not found further north than the point where the 4th degree cuts the Nile.

THE BACILLUS OF PARALYSIS.

Dr. W. Ford Robertson, in the Morrison Lectures he is now delivering at Edinburgh on the "Pathology of General Paralysis of the Insane," has, says a contemporary, opened another chapter in what may be called the romance of "The Battle of the Micro-Organisms." In his first address he produced evidence derived from experiment and research, showing that the disease in question was as specific in its origin as tuberculosis or typhoid fever or diphtheria—that is to say, that it is caused by the action within the body of a specific micro-organism resembling in form the bacillus of diphtheria. It had been found in the alimentary canal and respiratory tract, and also in the brain. The toxins or poisonous products formed by the bacillus and taken into the circulation caused the paralysis. An analogy may be found in the paralysis produced by narcotics circulating in the blood.

Dr. Robertson further dealt with the defensive action of the body against the diphtheroid bacillus, and recounted the results of experiments made by himself and Dr. McRae as to the interaction of living blood and cultures of the bacillus. They found that the white corpuscles of the blood were increased, and it was also noticed that in the tissues there was a similar increase. This phenomenon marked the defensive action of the body, the white corpuscles, known as phagocytes, having the power of attacking and destroying bacilli.

CLAUSTROPHOBIA.

Claustrophobia, which has recently been suggested as a possible cause in connection with the death in the Crick Tunnel, is a disease causing a morbid fear of being shut up alone in a small space.

[previous page](#)

[next page](#)