

Medical Matters.

SLEEPING SICKNESS.



The Government of the Congo Free State has made the most important announcement that the fight against sleeping sickness has given un hoped-for results. Two Europeans who had returned from Africa suffering from the malady have been cared for at the Colonial Villa of Watermael, near Brussels, and have been, it is believed, completely cured. The treatment adopted is based on the joint use of atoxyl and strychnine. The Government of the Free State has caused to be sent to all its physicians in Africa a detailed description of the remedy.

The treatment at first consists of subcutaneous or intramuscular injections of atoxyl, beginning with an injection of five cubic centimetres of a five per cent. solution of atoxyl, increasing the dose by one cubic centimetre at each treatment, every four or five days. This goes on until the maximum dose of ten cubic centimetres is injected, after which the dose is gradually diminished by a cubic centimetre at every injection, down to five centimetres.

The treatment during the second period consists of atoxyl injections, subcutaneous or intramuscular; of sulphate of strychnine by the mouth; and of cold douches morning and evening.

THE STERILISATION OF CATGUT BY MEANS OF BENZINE.

Dr. Kendirdjy has recorded, as reported in the *Lancet*, the results of an investigation of the various methods employed for the sterilisation of catgut, and he confirms the work of M. Beslier, who found the vapour of benzine to give more satisfactory results than alcohol or acetone. Dr. Kendirdjy states, however, that one sterilisation is not sufficient, as he has obtained cultures of the bacillus subtilis from catgut which had been once sterilised with benzine. He thinks that the process should be repeated five times. His modification of the method consists in heating the catgut in the vapour of crystallisable benzine at a temperature of from 120 deg. to 130 deg. C. for one hour on five successive days. The vapour of benzine does not affect the solidity or the suppleness of the catgut, and, when applied as directed, completely destroys the spores of the bacillus subtilis and all other micro organisms.

The Family History of Disease.

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The importance of the family history of patients, suffering from various diseases, is a matter to which, so far as I am aware, the attention of nurses is seldom, if ever, drawn. It is a matter, however, which often deserves the closest inquiry and attention, because the family history may explain obscure conditions, or throw a flood of light on the onset or progress of disease. Every doctor admits the valuable assistance which the well-trained nurse can afford him by observing and reporting the various symptoms which a patient exhibits between his visits; because, without such information accurately observed and recorded, he would often find it difficult to estimate the precise progress which the patient was making. To take only one example—by the system of the nurse recording temperature and pulse every four hours after abdominal operations, such accurate knowledge has been gained of such cases that the experienced operator, by merely glancing at the chart, can tell almost with certainty how the patient is progressing, how the wound is healing, and if the intestines are regaining their peristaltic power. I have, on several occasions, learnt from nurses facts connected with the patient's family history which it had not occurred to the patient to detail—in more than one instance facts which the patient was not aware of, but which proved conclusively the hereditary nature of the complaint from which she was suffering. It may be fairly said that there is an immense amount still to be learnt concerning the transmission of disease from generation to generation; and the more accurate facts which can be collected on this matter, the sooner will it be possible to define the general laws which must be at work to produce such results. To illustrate this argument, I may mention that, some years ago, I drew attention to the frequent association of Ovarian disease with Consumption. It is acknowledged at the present day that ovarian cysts arise from disease of the cells containing the ova in the ovary, though the precise cause of this disease has been somewhat widely disputed. Some writers hold that it arises as a consequence of pregnancy, others that it is caused by injuries due to strains, falls, and so forth. Of course, every nurse knows that when the cause of any disease has been ascertained, it is much easier to prevent its occurrence than when its causation is unknown. So this particular question is of

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