

Medical Matters.

THE TREATMENT OF SOME TROPICAL DISEASES

An interesting report is contributed to the *British Medical Journal*, by an Indian correspondent, of the discussions which took place at the Medical Congress which opened in the University Convocation Hall in Bombay on February 22nd. In no domain of medicine at the present time is interest more keenly centred than in that of tropical diseases, and the deliberations of the Congress at Bombay were a valuable contribution to the newest methods of treatment. We can only very briefly allude to some of the methods advocated under the various sections.

CHOLERA, DYSENTERY, ENTERIC FEVER, AND TROPICAL DIARRHŒA.

In a paper on cholera, with special reference to its treatment, Major Leonard Rogers, I.M.S., advocated the use of intra-peritoneal injections of hypertonic saline solutions, at the same time taking care to maintain the blood pressure, and showed a special cannula which he had devised for the purpose, and which had been used with good result. Khan Bahadur N. Choksy also described the lines of treatment adopted in 583 cases, in which rectal injections of saline solution were used.

A paper on appendicostomy in the treatment of intractable ulceration of the colon was contributed by Captain Gordon Tucker, I.M.S., who gave notes of five cases of chronic dysentery in which the operation had been performed, and indicated the type of Indian dysentery in which it is invaluable.

Another interesting paper in this section was one by Lieut.-Colonel Semple, R.A.M.C., on cases of recovery from typhoid acting as prolonged carriers of the infecting bacilli.

MALARIAL FEVER, PLAGUE, ETC.

In this section, presided over by Surgeon-General Hamilton, C.B., I.M.S., our contemporary reports that Professor Ronald Ross, C.B., F.R.S., in starting the discussion on malaria by a paper on the practice of malaria prevention, emphasised the economic effects of malaria on the community; he described the methods by which the amount of malaria in Mauritius was investigated, and laid down the following rules for sanitary officers in checking malaria:—

1. All antimalarial measures are good and useful and each should be employed in its proper place.
2. For stations where the population is great and dense, mosquito reduction should be the aim.
3. For scattered populations and villages the general distribution of quinine should be employed.
4. In the presence of severe malaria both mos-

quito reduction and parasite reduction should be employed together.

5. The sanitary officer should begin with those measures which can be immediately adopted, that is to say, as a general rule, with the cheapest ones.

Attention was directed to the necessity of parasite reduction in native children who were the principal homes for the malarial parasites.

The paper on the human factor in the spread of malaria, by Captain S. R. Christophers, I.M.S., and Mr. C. Bentley, dealt, we read, with a matter which has often been lost sight of in India; its consideration helps to explain the recent very serious epidemic of malaria in Bombay, where there has lately been an enormous congregation of labourers from all parts of the Presidency, on account of the great dock extensions which are in progress, and of the great impetus given to building in the island during the last four years. The same gentlemen also read a paper on the intimate pathology of malaria in relation to blackwater fever.

On the second day a discussion on plague was opened by a paper by Professor Kitasato, read by Professor Shiga, which showed that the Japanese investigators had arrived at the same conclusion as had been come to in India. Major Lamb described the facts connected with the etiology of plague, and Captain Liston indicated the lines on which plague epidemics should be dealt with. Essential measures were the removal of conditions favouring rat infestation, the prevention of importation into non-infected places, and, when these have failed, inoculation. In the "non-essential and doubtfully efficacious" measures he included isolation and treatment of the sick in hospitals, disinfection, and evacuation of plague-infected houses. The conclusions arrived at by Captain Liston were hotly contested.

SURGERY IN THE TROPICS.

The principal subjects dealt with in this section were cataract and vesical calculus. The extraordinary clinical amount of work done by officers of the Indian Medical Service was, we read, well illustrated by Major Smith, of Jullundur, who spoke from experience of twenty thousand cataract extractions, and Surgeon-General Stevenson, from over five hundred litholapaxies per annum during a long series of years in Hyderabad, Scinde.

A NEW ANÆSTHETIC.

Professor Bier has announced to the Berlin Medical Society a new method of producing anæsthesia, which consists in the injection of cocaine into the veins. Professor Bier applied this form of venal anæsthesia in a hundred cases with success. It is absolutely painless,

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