

MEDICAL MATTERS.

PELLAGRA.

Dr. Louis W. Sambon, F.Z.S., and Dr. Albert J. Chalmers, F.R.C.S., contribute to the *British Medical Journal* an interesting article on "Pellagra in the British Islands." They say in part:—

"Of all known diseases pellagra is certainly the one which escapes recognition most easily, not that it lacks individuality, because few diseases are better characterized in their full manifestation; not that it is of little importance, because few diseases are more harmful and deadly, but because it varies greatly in the nature, sequence and intensity of its symptoms; because it may remain clinically latent for years in the patient and epidemically dormant for long periods in a given region; because it avoids crowded cities and, as a rule, strikes the uncared-for peasant in remote country districts; because it principally affects the young with manifestations usually so mild that it is either overlooked or unheeded; because it breaks out in the mature and elderly under the stress of lowered resistance following in the wake of poverty and famine and engrafting itself on to other diseases; and because, in most countries, it is concealed with shame as the brand of destitution and madness. . . .

"Sociologically, the disease calls for the most urgent attention. Pellagra is an insidious disease, either rapidly fatal or of long intermittent course, leading to insanity. The pellagrous psychical disturbances are as many-sided and as obscure as the somatic manifestations of the disease, but the salient feature is an intermittent and progressive amentia, often assuming a semblance of melancholia and exhibiting from time to time regular outbursts of maniacal excitement. In some cases there may be all the appearances of progressive paralysis. Dementia is the invariable termination, unless the patient be cured, or carried off sooner by some intercurrent disease or mere exhaustion of the vital powers."

Dr. Sambon believes pellagra to be a germ disease and that the germ is a protozoal organism conveyed by a special kind of insect, a *Simulium*. It is interesting to learn that in countries in which malaria and pellagra occur, where malaria is, there, with occasional overlappings, pellagra is absent. Malaria, the mosquito-caused disease, is a disease of countries of stagnant waters, the haunts of the mosquito; pellagra is a disease of swift-flowing streams haunted by *Simulium*.

HOW SLEEP IS PRODUCED.

By MISS M. THERESA BRYAN.

Sleep that knits up the ravelled sleeve of care,
The death of each day's life, sore labour's bath,
Balm of hurt minds, great Nature's second course,
Chief nourisher in life's feast.

SHAKESPEARE.

Thomson may groan in verse about "losing half the fleeting moments of too short a life," but most of us are thankful indeed that our days are broken and rounded by sleep; that we can lay aside the affairs which often threaten to overwhelm us, and indulge in a spell of forgetfulness; in a manner, too, which recuperates our mental and physical energies. Puppets of perpetual motion as we mortals are, it is not a little wonderful that these regularly recurring periods of unconsciousness should overtake us, and the way in which the condition is brought about is quite simple and interesting.

For centuries the subject was a problem which exercised the minds of great men. So akin did it seem to the greater mystery of death that literary men were constantly associating it with that gaunt image. But if the subject received scant justice at the hands of the literary profession, it fared little better from the scientists. While those associated it with death, these confounded it with stupor. For a long time the commonly accepted theory was that sleep was produced by a fullness of the blood-vessels of the brain, which formed a sanguineous nightcap enveloping the brain. But, although this opinion was largely held, it was by some felt to be unsatisfactory, for the reason that a condition resembling sleep could not be artificially produced by pressure on the brain. This condition, though often identical with sleep, was really its counterfeit, coma or stupor, a state distinguishable from true slumber by the great difficulty of arousing the subjects of it. The question was eventually solved by Dr. Fleming, a professor in Cork, to whom it occurred to try pressure of the carotid arteries. He tried the experiment on a friend, and the result was a state of complete unconsciousness, in which, however, the subject had vivid dreams, with great activity, a few seconds seeming like many hours from the number and rapid succession of thoughts passing through his mind. The effects passed off on the removal of the pressure from the vessels. This was clearly a condition different to that of stupor and one not distinguishable from ordinary sleep. Dr. Fleming therefore cautiously sug-

[previous page](#)

[next page](#)