

AN OBSCURE DISEASE.

The Medical Officer of the Local Government Board has drawn attention to the recent occurrence in London of several cases of an obscure disease associated with cerebral symptoms resembling Botulism, and has suggested that steps should be taken with a view to providing facilities for diagnosis and for any necessary pathological examination. The Board is prepared to undertake pathological investigations of all suspected cases, and it is suggested that specimens of blood and post-mortem material, where available, should be obtained from patients.

The London County Council has therefore decided to place at the disposal of medical practitioners in London the services of its medical staff for consultation in this connection, and Dr. J. A. H. Brincker, Public Health Department, 2, Savoy Hill, W.C. (Telephone No. Gerrard 3641), or one of the other medical officers of the Council, will be available for this purpose. Application should in the first place be made to the Medical Officer of Health of the City of London or metropolitan borough in which the case may occur, in a manner similar to that which obtains in suspected cases of cerebro-spinal fever.

The following memorandum describing the symptoms of the disease, prepared by the Medical Officer of the Local Government Board, is annexed.

MEMORANDUM BY THE MEDICAL OFFICER OF THE LOCAL GOVERNMENT BOARD ON CASES OF AN OBSCURE DISEASE WITH CEREBRAL SYMPTOMS.

During the last two months a number of cases have occurred in this country which resemble Botulism in their clinical features, though identity with this rare disease so far has not been established.

The illness in question has been observed both in children and adults, though more frequently in adults.

Food infection has been suggested; but hitherto no one article of food has been proved to have been responsible. More complete and systematic review of the food of patients is required, as well as of other possible sources of infection.

Some cases have simulated Meningitis; and in others the suggestion has been made that the cases are Poliomyelitis of unusual distribution in the nervous system.

In the cases already reported, the duration

of illness has varied from six weeks or longer to a few days.

The onset of illness may be sudden or gradual. The one constant symptom is the rapid development of languor and drowsiness. This may be the most pronounced symptom throughout. The patient as a rule does not become completely unconscious. He lies in bed like a log, but is easily aroused.

Respirations are increased in number. The pulse is not rapid.

There may be a moderate amount of pyrexia in the earlier stages of the illness.

Muscular tremors, especially of the eyeball, are a marked symptom in some cases.

Usually there is unilateral or bilateral weakness of muscles supplied by the 3rd, 4th, and (or) the 7th cranial nerves. Ptosis is a very frequent symptom. As a result of the weakness of the facial muscles, the patient's face commonly has a mask-like appearance.

Constipation is usual. Retention of urine frequently occurs.

There is a marked dryness of the mouth and throat, and maybe some dysphagia. The patient's mouth, as well as his general condition, may simulate uræmia or the typhoid condition.

Death, which has occurred in a large proportion of the severe cases so far observed, seems to be due to bulbar paralysis.

STANDARD CURRICULUM FOR SCHOOLS OF NURSING.

THE RELATION OF HOSPITAL AND TRAINING SCHOOL ORGANIZATION AND ADMINISTRATION TO THE CURRICULUM.

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FINANCIAL RESOURCES.

Writing on the subject of "Financial Resources" the Committee on Education of the National League of Nursing Education say that "Schools of Nursing at present everywhere rest upon an unsound and precarious financial basis. None of them are endowed, none are maintained by public funds—none, in fact, have any real resources whatever for the conduct of their work beyond the provision which the hospital (whose nursing services the school is supplying) is able and willing to make. Most hospitals find it hard to get enough funds to keep their work going on a satisfactory basis. They cannot contribute to the support of schools; on the contrary, they must use the school to help to support the hospital. . . . Until there is a wider under-

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