

OUR PRIZE COMPETITION.

STATE WHAT YOU KNOW ABOUT MALIGNANT GLANDERS IN MAN.

We have pleasure in awarding the prize this week to Miss Kathleen Dinsley, Helvetia Street, Penny Hill, Catford, S.E.

PRIZE PAPER.

Glanders is primarily a disease of the horse, ass, or mule, due to a definite micro-organism, the *Bacillus Mallei*. It is transmitted to man by direct inoculation, and occurs chiefly in stable attendants, and those brought in contact with such animals. Fatal accidental inoculations have sometimes occurred in the laboratory, and the disease has occasionally been transmitted from man to man.

In man glanders generally starts about the hands and face, but occasionally in the nasal mucous membrane. The disease may be acute or chronic; the incubation period varies from about three days to two weeks. In the acute form the incubation period lasts from three to five days, and is succeeded by the occurrence of general malaise and febrile disturbances, and with severe pain in the bones and joints. The site of inoculation becomes swollen and painful, and the lymphatics leading from this to the nearest glands are enlarged and inflamed. A papular eruption which somewhat resembles smallpox occurs around the primary lesion, on the face and other parts of the body, each papule, as also the primary lesion, breaks down and goes on to the formation of an ulcer. In cases where the sore occurs over a bony surface, the periosteum may become involved and the underlying bone laid bare. Similar changes occur in the viscera, muscles and joints; when the infection thus becomes generalised throughout the body, it constitutes a form of pyæmia which is known as farcy. Almost all acute cases die.

In chronic glanders, similar symptoms are met with, but the course is slower, and there is little or no fever, and the disease is less extensive. After a month or more, cutaneous and muscular lesions may develop, which in time give rise to chronic ulcers and sinuses. Often there is a chronic discharge from lesions in the nose. About 50 per cent. chronic cases recover. The more chronic the course the better the outlook. Observation on dogs and horses appear to show that an attack of glanders confers no immunity against the disease.

Treatment.—The general health should be kept up as much as possible. Accessible lesions must be dealt with by modern surgical methods, and all discharges should be disinfected.

Patients must be warned of the danger of infecting others. Repeated inoculations of Mallein (a prepared culture of the bacillus) frequently lead to apparent recovery in horses, and the same agent has been used for chronic glanders in man with good results.

Should the discharge from a case of glanders come in contact with a wound, however slight, the actual cautery should be applied at once to the raw surface.

HONOURABLE MENTION.

The following competitors receive honourable mention:—A. P., Miss S. Simpson, Miss J. Robinson, Miss M. Barber.

QUESTION FOR NEXT WEEK.

What is a parasite? What external parasites attack man? Describe in detail the treatment and management of a case of scabies, with special reference to the prevention of the disease.

MENTAL DEFICIENCY IN RELATION TO VENEREAL DISEASES.*

This is one of the newest of a long list of instructive pamphlets published by the National Council for Combating Venereal Diseases. The fact that Mr. Tredgold was formerly Medical Expert to the Royal Commission on the Feeble-minded is sufficient guarantee of the authoritativeness of his writings. Being written for the masses, its style is attractively lucid and concise, and for social workers and nurses who are interested in the subject it will prove a very valuable text-book. The first fact that is given to the readers is certainly startling, namely, that one person in every 248 of the general population has some measure of mental deficiency or amentia. "The total number of mental defectives of all ages in England and Wales in the year 1906 being estimated at 139,000 individuals." The writer then goes on to classify them in easy groups: (a) idiocy; (b) imbecility; (c) feeble-mindedness. For the purposes of brevity he draws no line between idiots and imbeciles, but declares them to be the two classes most deeply defective, and that together they comprise about one-quarter only of the total number of defectives. He does not discuss them further because venereal disease is exceedingly rare among them. The feeble-minded, he tells us, are the most numerous of all defectives; he describes them thus:—"They can do useful

* By A. F. Tredgold, L.R.C.P. (Lond.), M.R.C.S. (Eng.), F.R.S. (Edin.).

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