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EDITORIAL.

ARCHIVES OF PEDIATRICS.

IMMUNIZATION AGAINST DIPHTHERIA AND MEASLES.

The most absorbing, if the most exhausting, duty of an Editor is to keep herself instructed by the written word, and in these strenuous times we long for the opportunity to study not only professional news, but the progress of science as it affects Nursing—and this is a very tall order.

Our attention has recently been called by a reader, herself an expert on Pediatrics, to recent issues of the "Archives of Pediatrics," an American monthly devoted to the publication of medical papers on the subject, and she writes: "The Archives have been very interesting lately, and there is much up-to-date stuff which you might at least mention in the Journal." We quite agree.

In one issue, which is entirely devoted to Diphtheria, very interesting articles on preventative measures appear. Roughly, it is surmised that all infants are protected by the natural maternal immunity till four or five months of age. After that the Schict test should be applied, and those found still with natural immunity left. Then tried again at one year. Those who have maternal immunity at one year will not take diphtheria even if exposed to it. Most interesting reports are inserted from the children's institutions in New York, where the system is in swing, and it is advised that those who have not natural immunity must be inoculated and doses are suggested, &c.

Dr. Abraham Zingher, New York, writes on "Preventative Diphtheria Work in the Public Schools of New York." Dr. Charles Hermann, in the Discussion, congratulated Dr. A. Zingher on what he has accomplished in such a short time. Owing to his repeated demonstrations before the larger medical societies,

the majority of the physicians in New York City are familiar with the value of the use of the toxin-antitoxin mixture in the immunization against Diphtheria. The idea is that children should be immunized as for small-pox.

Dr. Francis G. Blake, New York, gives evidence of research in experimental measles. He has been very successful, and surpassed findings of Anderson and Goldberger and others, and put the subject on a firmer basis.

There is an interesting allusion (by Dr. Henry F. Helmholtz) to Pfaundle's Clinic in Munich, where it is shown that 173 individuals exposed to measles, and injected with 5 c.c. of blood serum taken from convalescent measles patients seven to fourteen days after the temperature dropped to normal, had been absolutely protected against measles, &c. This will have a far-reaching effect on our child mortality and after defects.

According to Dr. Charles Hermann, the nasal mucus from children with measles (free from other diseases) at the beginning of the eruption was collected on small swabs, or drawn into capillary tubes, which were sealed. This mucus was applied by touching the mucous membrane of healthy children between four and five months of age. (In large cities where nearly all mothers have had measles a relative immunity is conferred on their infants which lasts about five months. This is absolute during the first and second months, and gradually disappears.) It is thought well to inoculate while relative immunity is still there, and render the child immune at least for five years, as most deaths from measles occur below that year (measles and broncho-pneumonia, &c.).

It would appear, now that nurses are to be systematically educated in the Nursing Schools, that the "Archives of Pediatrics" should find a place in the Nurses' Class Room amongst other up-to-date literature.

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