

NEWS FROM NORTHERN IRELAND.

NORTHERN IRELAND TUBERCULOSIS ACT: IN FULL OPERATION ON SEPTEMBER 1st, 1947.

Regulations made by the Northern Ireland Ministry of Health and Local Government have fixed September 1st, 1947, as the date on which the Public Health (Tuberculosis) Act (Northern Ireland), 1946, will be brought into full operation.

From September 1st, 1947, the Northern Ireland Tuberculosis Authority will take over from the County and County Borough Council the full responsibility for the prevention and treatment of tuberculosis in Northern Ireland. Sanatoria and other property used for tuberculosis purposes will be transferred from the County and County Borough Councils to the Authority on that date.

Under Part III of the Act, tuberculosis in all its forms will, on September 1st, become a compulsory notifiable disease. Arrangements will also be made by the Northern Ireland Tuberculosis Authority for the free examination by skilled tuberculosis specialists of persons whom general practitioners intimate as being suspected cases of tuberculosis.

MORE NURSES WANTED: EXPANDING SERVICES IN NORTHERN IRELAND.

"The Nursing Profession, in partnership with the medical profession, has now more than ever before a powerful contribution to make to the health services of the country," said the Northern Ireland Minister of Health and Local Government in Belfast this week, when he opened a Mobile Nursing Exhibition.

The Minister said Northern Ireland's constantly expanding health services—due to be expanded much further in the next few years—call for a considerably higher rate of recruitment of student nurses than had been the case in the past. Whether the new health services succeed or not would largely depend on an adequate supply of trained nurses.

Referring to salaries and conditions of service obtaining in the nursing profession in Northern Ireland, the Minister said the recent adoption of certain recommendations meant that nurses in Northern Ireland are on exactly the same footing as regards salaries as those in Great Britain. Most hospitals had already adopted a 96-hour fortnight, and all would do so as soon as adequate staff made such a course possible.

Since the year 1941, continued the Minister, nurses' salaries had increased on an average by 100 per cent. To-day it was possible for a nurse in a general hospital to climb from the rank of staff nurse, with salary and emoluments valued at £280 a year, to the position of matron in a large hospital with salary and emoluments valued at £1,000 per annum. Other factors which had helped to place the nursing profession on a par with the best that could be offered elsewhere were holidays with pay and special holiday allowances, generous arrangements for sick pay and sick leave, and a pension on retirement.

NEWS NOTES FROM WASHINGTON, D.C.

STREPTOMYCIN.

Résumé of "Summary of U.S. Army Experiences with Streptomycin," by Maj. Edward J. Pulaski, M.C., Brooke General Hospital.

Systematic study of streptomycin now underway at Brooke Army Medical Centre shows streptomycin is proving effective against several serious and sometimes fatal conditions against which neither penicillin nor the sulfa drugs have any beneficial results.

Streptomycin still is scarce, costly and available for general medical practice only under special circumstances. Many exaggerated and unfounded reports have been spread as to its effectiveness, until it has gained the reputation of being a "miracle drug." The study represents the results of the army's cumulative experience with streptomycin.

There can be no question that the drug is effective against several disease-causing organisms which are resistant to both penicillin and any of the sulfa drugs.

Probably the clearest case is for use of the new drug in tularemia, the causative organism of which appears especially sensitive to streptomycin. The response usually is rapid and the cure is permanent.

It is of real value in bacteremia, fever due to bacterial organisms circulating in the blood—but only providing the particular germs involved are sensitive to it. Several, including two fairly common forms of streptococci, are almost completely resistant to penicillin.

Streptomycin also has proved a life-saver in several mixed infections of the ear, brain and meninges, or linings of the brain and spinal cord. It is proving quite effective in mastoid infections, usually in conjunction with penicillin; but where organisms are present which are resistant to this drug. Some of the most dramatic results have been obtained in cases of meningitis, when it is introduced directly into the cerebrospinal fluid. Meningitis may be due to one or more of several organisms, in addition to the so-called meningococci, which are the most common cause. Streptomycin has saved several lives in the army practice.

There also has been some success, although it is difficult to evaluate at present, in infections of the lungs and pleural cavity, where both penicillin and the sulfa drugs have proved ineffective. Good results were obtained in treatment of infantile diarrhoea. The drug, which is tasteless, was incorporated in the milk formula.

Some of the best results have come from use of the drug to prevent the spread of peritonitis, provided a susceptible organism is responsible for the condition. There were 52 recoveries among 57 patients, and the deaths of three of those who succumbed was not due directly to the peritonitis. Best results were obtained when streptomycin and penicillin treatments were combined.

In wound infections, the new drug cannot take the place of penicillin, although it may be of considerable value in certain selected cases.

Ordinarily the drug should not be used without first determining the causative organism and the dosage to which it is susceptible.

Résumé of "Streptomycin in the Treatment of Tuberculosis," by Lt.-Col. John B. Wallace, M.C., Fitzsimons General Hospital.

Streptomycin has a beneficial effect, at least temporarily in a majority of the cases of tuberculosis in which it is used, but the treatment is accompanied by some real dangers.

Such is the indication from observations now under way at the Army's Fitzsimons General Hospital at Denver, a centre for tuberculosis treatment.

In the spring of 1946 the Army, Navy and Veterans' Administration were allotted an amount of the still rare and costly drug sufficient to permit an investigation of its efficacy, particularly in respect to the disease for which extravagant claims had been made.

It is still too early to make definite pronouncements.

Some of the more overt and alarming symptoms of tuberculosis subsided. No doubt remains that streptomycin should be used without delay in cases of tuberculous meningitis, which usually are rapidly fatal. It also may be used with discretion and probably good results in cases of pulmonary tuberculosis.

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