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EDITORIAL

VENEREAL DISEASES.

At one of the sessions of the Royal Commission on Venereal Diseases, Sir William Osler stated that statistics of deaths from syphilis gave a very imperfect idea of the real number of deaths from this disease. He said that it caused many deaths that were not reported as due to syphilis. He thought that as a killer syphilis came about third on the list. He favored compulsory notification, and felt that the nation could take the chance that this might cause some cases to be concealed. Gonorrhoea was in his opinion a disease that stood very high as a disabler, and gave rise to a very great deal of morbidity. He thought that medical students should be carefully instructed on these diseases in the out-patient clinics and in hospital wards; but that these diseases should not be made a separate part of the curriculum. In the past sufficient attention had not been given to these diseases.

Dr. J. H. Sequeira stated that at the London Hospital skin clinic at least 13 per cent. of the cases, both in men and women, were due to syphilis. He said that instances of innocent syphilis were quite common, and that the larger number of women were infected after marriage. He said salvarsan and neo-salvarsan were valuable remedies, but that it was necessary to combine them with treatment by mercury. He was afraid that compulsory notification would not succeed; but thought the medical profession should be armed with powers to do something to prevent the spread of venereal diseases, and should be immune from damages if its members exercised their power. He thought there ought to be more hospital accommodation for such cases.

Dr. Dubois Havenith, of Brussels, said that the means of preventing the spread of infectious diseases were notification, isolation, disinfection, and sanitary measures. Initial sores should be disinfected and soiled articles destroyed or properly cleansed. In the case of syphilis disinfection meant treatment. In the care of syphilis he said the essential things to bear in mind are early diagnosis, efficient treatment, and supervision of the patient. Careless patients should be placed under some system of control.