

## RECENT ADVANCES IN PREVENTIVE MEDICINE.

ABSTRACT OF THE ADDRESS IN STATE MEDICINE, DELIVERED BEFORE THE AMERICAN MEDICAL ASSOCIATION, AT THE 33RD ANNUAL MEETING AT CHICAGO, ILL., JUNE 7-10, '87. BY GEORGE H. ROHÉ, M.D., PROF. OF HYGIENE, COL. OF PHYS. AND SURG., BALTIMORE, MD.

PROGRESS in any branch of science or art may be measured either by the number and character of new discoveries made, or by the gradual advances in the application of knowledge previously acquired. Judged by either of the criteria the record for State Medicine during the past year is a creditable one.

In the field of epidemiology and endemiology, the progressive extension of the fifth great pandemic of cholera first claims attention. Extinguished in the portions of Italy, France and Spain ravaged in 1885 and 1886, it has slowly invaded southeastern Italy, Hungary and other Austrian possessions, and has been imported into South America, whence it threatens the United States by several routes. The danger of invasion of this country is at present greater than at any time within the past three years.

Yellow fever inoculation, as practiced by Freire in Brazil, and Carmona in Mexico, has claimed a large share of the attention of sanitarians during the year. The claims made in favor of this method of preventing this scourge are now being subjected to an official investigation authorized by the United States Government.

Diligent search has been made for the specific organism supposed to be the infective agent in vaccine virus, but without definite success. The results obtained are not entirely negative however, and one may cherish the hope that a solution of this problem will soon be reached.

The relation of a peculiar disease

of cows to scarlet fever, and the discovery of a specific microbe in the blood in the latter disease have attracted much attention. The restriction of scarlet fever will doubtless be more thoroughly effected so soon as physicians are convinced of its bacterial nature, and clearly comprehend its mode of transmission. Statistics are given showing what has already been accomplished in this field.

Sternberg, Fränkel and Weichselbaum have studied the specific microbe of croupous pneumonia, which the former regards as identical with his *micrococcus Pasteuri*; in which opinion both the other authors mentioned, coincide. Dr. Baker, of Michigan, has also shown that croupous pneumonia seems to be dependent upon a cold, dry atmosphere.

Measures for the restriction of pulmonary tuberculosis are adverted to. Tuberculous patients should not be treated in the same hospital wards with non-tuberculous individuals and prompt disinfection of the sputa and other discharges should be practised in order to diminish opportunities for infection. General sanitary measures should however not be neglected in the warfare upon the bacillus. There is danger that a too exclusive attention to the microbial factors of disease will narrow our views of epidemiology and preventive medicine.

It seems to be established that the micro-organism discovered in the intestinal lesions and discharges in typhoid fever is the cause of this disease. The fact that this microbe may preserve its vitality for a consider-