

THE INFLUENZA GRIP ITS CHARACTERISTICS, PREVENTION, &c.

The Influenza is a subject of much interest the world over at the present time. Some authorities believe that its germs or rather spores are "in the air," and flit with the wind from place to place as apparently do those of the potato blight, and, although contagious, that contagion exercises but little influence in its spread. The best and latest authorities--the weight of authority, however, support the view that the disease is spread by contagion in the same way that is measles and scarlet fever. In a work by Dr. Sisley, M.R.C.P., Lond., &c., just published (by Longmans, Green & Co., London and New York), the author furnishes a great deal of data which makes it evident that it spreads from the sick to the sound by contagion, that isolated cases precede an epidemic, that epidemics spread along the lines of human intercourse. --in fact, he finds that in every case where the course of the disease has been studied with care it is apparent that it spreads in the same way as any other contagious disease.

In The Lancet (London, E.) of Dec. 5, inst., is an article by Dr. J. R. Leeson, of St. Thomas' Hospital. He says: Viewing influenza in the light of recent researches upon acute specific fevers, there is everything to warrant us in the induction that it is a germ disease; the analogy is complete. My object in this contribution is to draw attention to an experiment which to my mind proves that it is not "in the air," in the commonly accepted sense of the term, but passes from the sick to the healthy in much the same manner as do ordinary infectious fevers. Twickenham has been ravaged by the disease. The Metropolitan and City Police Orphanage here, containing nearly 300 souls, is under my medical care. When the disease appeared. I was particularly desirous that the Orphanage should not be attacked. . . . I therefore prevailed upon the authorities to institute a most rigid system of isolation. The children were not allowed to go to church, the officers were entreated to keep within the walls and grounds of the building, all visiting was stopped both of parents and friends. Now although the disease prevailed all round the institution, even in the head master's house, which is situated near the school, no case occurred among the inmates. I consider this is a conclusive proof that the disease is not "in the air," otherwise the children must have shared the fate of the surrounding families, but that it passes from the patients to their friends and neighbors, and those who come into immediate contact with them, in the same way as do measles and scarlet fever. In previous years, when epidemics of these diseases prevailed in the neighborhood, we always adopted the same means as are now in force against influenza, and our success has been nearly as complete.

Dr. Leeson thus concludes: My partner, Dr. Bolton, has had several very clear cases which seem to place the period of incubation at about five days; he has also drawn my attention to the influenza tongue, which he says is an "anemic tongue," *the edges being usually indented*, in addition to its dorsum carrying a thin white fur, and, as far as I know, he is the first to recognize its anemic character. My impression is that the disease is most infectious in its early stages, and I believe a week of isolation will be sufficient for most cases.

Dr. Clement Dukes, M.R.C.P., &c., of Rugby school and hospital, in The Lancet of Nov. 20th, gives his experience in several large schools. In the Rugby School, with 414 boarders. in the 1890 epidemic, only 10.3 per cent. were affected; in 1891, with 447 boarders, 19 per cent. suffered; or in the two epidemics, 15.1 per cent. He says: I isolated every case as soon as it arose, as carefully as if I had scarlet fever, small-pox, or diphtheria to deal with. Every case was at once removed to the sanatorium. Every case, however mild, was kept in bed for five days, and another five days at the sanatorium in order to recover strength and to get hardened and disinfected by fresh air. At the first I had not realized the importance of this, and the mildest cases suffered in consequence. They then returned to school, and other precautions were taken for some days to prevent cold. I saw no after effects.

In another large school under Dr. Dukes' care, where the means of isolation were not so perfect, in the 1890 epidemic there was no influenza, while in 1891, 50 per cent. were infected. In another school which he knew of, where no isolation was attempted, 94 per cent. were seized