# THE FARMER'S ADVOCATE

#### AND HOME MAGAZINE.

THE LEADING AGRICULTURAL JOURNAL IN MANITOBA AND N.-W. T.

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# Publisher's Announcement.

Mr. W. J. Black, B. S. A., for the past two years editor of the "Farmer's Advocate and Home Magazine," has accepted the position of Deputy Minister of Agriculture in the Manitoba Department of Agriculture, rendered vacant by the resignation of Mr. H. McKellar, former Deputy, and will shortly enter upon the duties of that office. We congratulate Hon. Mr. Roblin, the Premier, upon his choice, though we must confess that the habit into which our statesmen have fallen of picking out their leading officials from the "Farmer's Advocate" staff is becoming rather monotonous. A native of Dufferin Co., Ont., and a graduate of the Ontario Agricultural College, Mr. Black will bring to his new work knowledge of its needs, energy, enthusiasm, executive ability, and gifts as a speaker, as demonstrated in Farmers' Institute and judging-school work, that will lend great strengh to the administration of the Department. Dr. A. G. Hopkins, whose prominent position and work as associate editor for several years past, have made a very marked impress on the West, succeeds Mr. Black, and he will have a strong ally as associate editor in Mr. F. S. Jacobs, B. S. A., a thoroughly informed and capable agricultural journalist of several years' experience. In addition to his practical knowledge of farming, he is also a graduate of the O. A. C., taking his degree at the same time with Mr. Black. Subsequent to graduation, he spent considerable time in Manitoba and the Northwest Territories, becoming acquainted with the system of farming, conditions and needs of this country.

## Should be in Every Farmer's Home.

Enclosed find \$1.50 for one year's subscription to your valuable paper. I think it is an ideal paper, and should be in every farmer's home. Russell, Man. W. G. ROBB.

# Horses.

### An Authority on Glanders.

Prof. John McFadyean, the great veterinary authority of the English-speaking world, speaks as follows re this serious disease of horse, ass, and man:

Glanders was traceable back to the earliest days of medical literature. Aristotle, Hippocrates, Apsyrtus and Vegetius, all described the symptoms of glanders. The earliest English writer to mention glanders was Herbert, who wrote on Husbandry in 1523. He mentioned farcy as well as glanders, but did not recognize their relation to each other. He described glanders as contagious, and incurable when it reached the stage of "mourning at the chine." Markham in Markham in 1662 described glanders and farcy, but did not seem to be aware that they were interchangeable. A translation of Soleysell by Hope in 1717 referred to glanders as a most dangerous and malignant disease. About the close of the 18th century a number of writers devoted some attention to the disease, but it was to a Danish veterinarian, Viborg, that credit must be given for first arriving at the truth that glanders and farcy were one and the same disease; that they spread by contagion, and were due to a fixed virus which was destroyed by heat and desiccation.

In England St. Bel, the first Professor of the Royal Veterinary College, recognized the dangerous and contagious nature of glanders, as did his successor-Professor Coleman. Ventilation was Coleman's special hobby, and not unnaturally he taught that although the disease was contagious it might be generated in dirty stables by impure air. Many writers in the first half of the



W. J. Black, B. S. A. The newly-appointed Deputy Minister of Agriculture for Manitoba.

19th century arrived at the conclusion that farcy and glanders were interchangeable, and that both were contagious, but very few believed that they arose and spread only as the result of contagion. Not until Loeffler and Schutz in 1882 discovered the causal organism was it definitely settled that glanders could not arise de novo. Probably only during the last twenty years has this belief been generally accepted.

Glanders is specially an equine disease, and if all glandered horses could be destroyed the disease would be exterminated. It is due to a micro-organism-the bacillus mallei, a tissue parasite seldom found in the blood, even in acute cases. It presents the appearance of a nonmotile rod, but in some cultures gives rise to a thread-like formation. It is easily cultivated on sterilized potato, grows readily at a temperature of from 97 to 100 degrees F., causing on the third or fourth day a yellow discoloration, which becomes darker in time, occasionally reaching a chocolate brown, which is very characteristic. In bouillon it causes turbidity, with a surface growth and a tenacious ropy sediment. Staining the bacillus in tissue sections is difficult, especially in old lesions when the organisms are few.

Thorough disinfection of infected articles or premises is not difficult. The vitality of the bacillus is not great, being destroyed in a short time by exposure to sunlight, and by such substances as carbolic acid and corrosive sublimate. The bacillus retains its vitality in ordinary clean water for some 10 or 15 days, and silk threads, which had been saturated with pure cultures and then dried, were found infective as long after as 80 days. In ordinary positions, such as are afforded in stables, the bacillus has to contend with other organisms which impair its vitality. The

old notions of the necessity for destroying old infected buildings to get rid of infection are entirely wrong. The cases in which glanders has broken out in horses that were put into old stables which had been badly infected months or years previously are explained by the simple fact that some of the animals suffered from latent glanders when placed in the stable.

In Canada good work has been done by the Veterinary Branch at Ottawa; the methods adopted for stamping out this disease being up-to-date and reasonable.

### Swamp Fever, the Equine Scourge of the Canadian Middle West.

A correspondent asks for information on what is, undoubtedly, the scourge of horseflesh in the prairie country, namely, swamp fever. This disease has been diagnosed in many different sections of the country, being first seen in the Red River Valley, and as far west as Portage la Prairie. It is incurable, and up to date the cause cannot be said to have been found. Unfortunately, some laymen, and professional men, too, for that matter, confuse this disease with typhoid influenza, which disease is, in the majority of cases, amenable to treatment with satisfactory results.

Swamp fever symptoms may be enumerated as follows: The pulse is often out of proportion to the temperature, e.g., a pulse of fifty per minute, and a temperature of 105° F. In addition, there is a peculiar thrill felt just after the regular pulsebeat has been felt and the wall of the artery relaxing. The temperature is variable, high for a time, then down, later rising again, and towards the end it remains high, and when the temperature is low one is apt to be deceived as to the disease The appetite may be described as voracious, and yet, in spite of good feeding, the horse gets thinner The mucous membranes of the and thinner. mouth and eyes are extremely pale, an evidence of what we may, to make our meaning plain, term bloodlessness. The blood in this disease has changed. There is extensive destruction of the red blood corpuscles (blood consists of a fluid and a solid, the latter being made up of red corpuscles and white corpuscles, about eight million of the former per cubic centimetre, the white running into the hundred thousands per c. c.), from what cause is not known, but this blood-cell destruction is revealed by the paleness of the mucous membranes above mentioned. Occasionally, an increase in the urine passed daily is noticed, which is an unfavorable symptom, indicative of a breaking up. The sick animal also has a dragging gait. So far as the evidence goes, it does not seem to be a contagious disease, and it usually appears about June, cases increasing in number until October. It is held by some that the sloughs are the source of infection, and that hay from such sloughs is dangerous to use. Some veterinarians advise their clients to feed timothy hay or oat sheaves in place of the slough fodder, and with beneficial effects where their advice was followed.

The chances of recovery of affected horses are practically nil. Recoveries, when occurring, are in horses in which the disease was noticed early, and treatment given. For all practical purposes, at the present time, we may consider this disease In any event, eighty to ninety per as incurable. cent. die, and if a veterinarian claims great success from his mode of treatment, with recoveries of more than fifteen per cent., we can be reasonably sure that he has made a mistake as to the disease he is treating. The post-mortem appearances are typical of a blood-losing disease: The body is very deficient in flesh; the natural fat has largely disappeared; the blood is coagulated in a yellow jellylike clot, with a small amount of red sediment, as it were, formed by red blood cells; occasionally, the blood is found more or less fluid, and divided into distinct layers, the larger portion at the top being a thin, syrupy yellow fluid, the other portion of a dirty red fluid, which contains the red cells. The milt or spleen is much enlarged, the liver unchanged. The kidneys, in some cases, show signs of a chronic inflammation. The lungs are usually healthy in appearance, but the heart is generally enlarged, and the cavaties filled with clotted material. No ulcers are found in the intestines, although the probable entrance of the infection is there, if the theory of infected hay is tenable. Many drugs have been used in this disease, quinine and arsenic (Fowler's solution) giving the best results. the latter drug during the chronic stages, the former during the high-fever periods.

This disease is seen in the Dakotas and Minnesota, and is a severe financial drain on the farmer among whose horses it gets a foothold. As many are apt to confuse the two diseases, typhoid influenza and swamp fever, we submit the following differences:

### SWAMP FEVER.

Variation in temperature during the disease; pulse out of proportion to the temperature.

Appetite good, often ravenous; no cough. Mucous membrane very pale; general appearance of bloodlessness.