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## ON THE PREVENTION OF DIPHTHERIA.

AT the last years Meeting of the Philadelphia Medical Society, Dr. A. Jacobi (Prof. Clin. Med., Col. of Physicians and Surgeons, and Physician Bellevue Hospital, N. Y.), author of a standard treatise on diphtheria, by special invitation read an extensive paper on this subject, from which we take the following valuable extracts, as published in the N. Y. Medical Journal.

Diphtheria is a contagious disease. Severe forms may beget severe or mild forms. Mild cases may beget mild or severe cases. There is probably no spontaneous origin of diphtheria any more than there is a spontaneous origin of cholera or scarlatina. The mild variety is that from which adults are apt to suffer. It made me proclaim the warning that there was as much diphtheria out of doors as there was in doors; as much out of bed as in bed. With this variety the adult is in the street, in business, in the school-room, in the railroad car, in the kitchen and nursery. With this variety, parents, while complaining of a slightly sore throat, kiss their children. Wherever it is suspected it ought to be looked after. Where it is seen it ought to be isolated and treated, less perhaps for the sake of those who are sick than of those who are in serious danger of being infected. This is the more necessary as this form is apt to last long. Serious, undoubted cases are also apt to last for weeks, and some of them months. As long as they persist they are contagious.

These reminiscences and quotations from former writings must justify the pre-eminent place I claim for preventive treatment. Those sick with diphtheria, severe or mild, must be isolated. If possible, the other children ought to be removed from the house. This can but rarely be done in the homes of the poor, in the densely pop-

ulated districts. A great charity is still waiting for its consummation—viz., that of erecting buildings, dormitories, and play-rooms for those who ought to be temporarily exiled from their infected homes. A suggestion of mine, before the New York State Medical Society at its meeting of 1882, resulted in the erection of the Willbrod Parker Hospital, of New York for the benefit of those suffering from scarlatina and diphtheria. The erection of a sufficient number of temporary homes would be a still greater protection to the public at large. If it is impossible to send the well children away, let them remain out-side the house, in the air, as long as feasible, and with open bedroom-windows during the night, in the most distant part of the house; during the winter on a lower floor. Their throats must be examined every day, and their rectal temperatures taken by the mother, so that the physician may be called on the occurrence of but slight changes. The few minutes spent in this way are amply repaid by the safety they may accomplish. The attendants upon patients with diphtheria must have no intercourse with the well children: though a brief visit of the physician may not render him sick or dangerous to others, a long exposure affects him or a nurse to a greater or less degree. The well children of a family in which there is diphtheria must not go to school or church. Schools must be closed when a number of pupils have been attacked; or, better still, when there is an epidemic, though it may not yet have affected the school-children to a great extent; the teachers ought to be taught how to examine throats, and directed to do so every morning, and send home those children who are suspected.

When an attack of diphtheria has made its appearance, it is time enough to examine the hygiene condition of the house