United Services Medical Society.

Session 1910-1911.

ADDRESS BY THE PRESIDENT,
Colonel Sir David Bruce, C.B., F.R.S.

In making a few remarks at the opening of a new Session, my first duty is to thank the Society for the honour done me in electing me to the office of President for the ensuing year.

This is the fourth year of the Society, and I am glad to be able to report that the number of members keeps up. These are distributed as follows: —

Navy ..... 205
Army ..... 275
Indian Medical Service ..... 26
Territorial ..... 15

There is, I believe, a feeling that there is a want of vitality in the Society, and that if the papers were more varied, the interest of the members would be stimulated. Another complaint has been made that the Society has been too purely medical, and that too little attention has been paid to the military aspects of our work. Whether there is any truth in these complaints I am unable to judge from personal knowledge, as I have been abroad during the last two years; but, granting that a little slackness has crept in, I would call on the members to come to the rescue, and, by the number and variety of the papers sent in this Session to make the Society "strike its head against the stars." I know our two secretaries are determined to spare no effort in making the Society throb with life, and I hope all members within reach will second them in their endeavours by attending the meetings and joining in the discussions. As for those members who are not within reach, they can still take part in the good work by sending in papers, which will be taken care of and read before the Society by one of the secretaries.

The subjects which may be brought before this Society are, of course, very varied, including Surgery, Medicine, Hygiene, Organisation and Administration, on sea and land, during peace and war, at home and abroad, and it is therefore difficult, perhaps, to find a sufficient audience of medical officers interested in every paper which may be brought before this Society. The other
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medical societies in London are more differentiated, and therefore feel this difficulty less.

But it must be borne in mind that it is not our business to become specialists to the exclusion of the other branches of our profession. We may be called upon at any moment to do the work of the oculist, laparotomist, bacteriologist, physicist, chemical analyst, &c., and in places where there are no experts to call in to our aid, and often not even a book to consult. At the beginning of the siege of Ladysmith the first thing I was called on to do was to sew up several holes in a small intestine which had been wounded by an accidental revolver-shot. When I look back on the same siege I see many things in the light of experience which could have been done better. For example, at that time we did not know as much about the breeding of flies as we do now. With our present knowledge I am sure we could have prevented, to a great extent, the truly Egyptian plague of flies which occurred, and the consequent increase in the spread of enteric fever. In addition to being a surgeon and entomologist, it was very necessary to be a sanitary specialist, as the water supply and the disposal of refuse in Ladysmith were also difficult to cope with.

These arguments are brought forward to induce every Naval, Army, and Territorial Officer of the medical services within reach to attend our meetings. However interested they may be in some special subject, they will, perhaps, hear something or see something demonstrated here which will be of supreme advantage to them on some future occasion.

Now what are the subjects which are most important at present to us as Service men? In the front rank still stand enteric fever and dysentery. If anything could be done to enable the soldier to escape these diseases in time of war a very great advance would be made. In times of peace, in barracks and camps, doubtless the mode of fighting typhoid fever and dysentery by means of ordinary sanitary methods is the sound one. But on active service in the field it does not seem possible to keep them altogether in hand by these means, and some other method must be added. For my own part, I have always looked to some process of artificial immunisation as the most probable way to reach the wished-for result. If the soldier could be made completely immune to enteric fever and dysentery, even for only six months, the problem would be solved. Anti-typhoid inoculation was in vogue during the last South African war, but it proved useless. Since then the method has been improved, and, according to Lieutenant-Colonel Sir W. B. Leishman's
latest figures, the case-incidence in twenty-four test units has been as follows:—

<table>
<thead>
<tr>
<th>Inoculated</th>
<th>Non-inoculated</th>
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<td>5.39 per 1,000</td>
<td>30.4 per 1,000</td>
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This substantial lowering of the case-incidence is very gratifying; but whether this artificially induced immunity will stand the strain of active service remains to be proved.

Malaria is another malady affecting soldiers which takes a prominent position in the baleful ranks of disease, and, in spite of the epoch-making discoveries of Laveran and Ross, little seems to be done in India and the Colonies to prevent its ravages. Lately, it is true, a conference on malaria has been held at Simla, and something may now be done; but it is thirty years since Laveran discovered the cause of malaria, twelve since Ross discovered the mode of spread, and the same length of time since Koch demonstrated the use of quinine as a means of prevention. *Festina lente!*

Plague is beginning to lose its terrors, as has been the case with cholera, now that its mode of conveyance by means of the rat-flea has been established and means of preventing it made possible. The work done, under the direction of the Lister Institute, by Lamb, Liston, and others, of the Indian Medical Service, is most illuminating and worthy of all praise.

Sand-fly fever, although non-fatal and of short duration, also causes much sickness in many parts of the world, and has been the subject of investigation during the last two years by Birt and Marett. The interesting discovery that sand-fly depends on the droppings of the wood-louse for its existence in the larval stage may open some way of prevention.

The so-called seven-day fever described by Rogers (I.M.S.) and Clayton (R.N.) is also of interest to the Navy and Army, but more work will require to be done before its true nature and mode of spread is established.

In surgery there are numerous important questions, such as anaesthetics and antiseptics on active service, and many others.

The effects of the *Spirochæta pallida* and the *Gonococcus* are still far too marked on our sailors and soldiers. A great deal could be done in the way of prevention if more determined efforts were made on the part of the military authorities and medical officers. The treatment of these diseases has progressed of late years, and there seems some likelihood of further improvement in this direction in the future.
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On the hygienic side of our work there are, of course, many of the most important subjects affecting the sailor and soldier. I have been struck lately by the discovery that beri-beri is due to the polishing of rice, by which it loses the greater part of its nourishing power. It might be worth investigating, if it has not already been done, as to how much of the nourishing power is taken from wheat by analogous processes. Then, again, the question of tinned foods and their effect on health. Why did so many of us suffer from jaundice in the South African War? How best to filter water in the field. Then there is the question of clothing, and the best mode of carrying kit. Or, again, in regard to the feet: should the soldier’s boot approach more to the natural shape of the human foot than it does now, or is the present shape satisfactory? The question of physical training of the soldier is also most important, and its effect on the soldier’s heart.

Medical organization for war is completely altered. Questions coming under this heading are naturally of supreme importance to Service officers.

The Territorial Medical Force has been lately established in a much more serious fashion than the old Volunteer Force, and the organisation of voluntary aid societies has been put on a definite footing. We hope to have papers by Territorial officers on the special difficulties which affect their Service.

These and many other subjects ought to employ the energy and time of this Society. Much has been done, but much more requires to be done.

What is wanted is work, intelligent, persevering work, as, in my way of thinking, Nature may be looked on as something ductile, which is capable of being moulded into any shape or form by the worker who is not discouraged by failure, “but strong in will, to strive, to seek, to find and not to yield.”