A CURIOUS EPIDEMIC RESEMBLING SMALL-POX.

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This epidemic occurred among the black troops at Bohotleh in Somaliland while I was in medical charge of that post.

While I call it an epidemic resembling small-pox, I must admit that I was at first very doubtful as to its true nature, and I did not know whether to call it small-pox or chicken-pox; however, all things considered, I think it resembled small-pox more than any other disease.

Although, perhaps, no disease has so many varieties as small-pox, I have never seen a variety or description of one which quite resembles the one which forms the subject of this essay.

The origin of the epidemic is very obscure, for although the disease followed very shortly on the arrival of a draft of levies from Burao, no cases of the kind had been seen or heard of at that post; but the infection may have been conveyed from Berbera, a town with a large population where almost any disease might occur unrecognised.

While the disease was in progress at Bohotleh some troops came in from another quarter, and some of these left after a week, returning after a similar period; one of these men then contracted the disease, thus enabling me to ascertain the incubation period of the disease, which must, therefore, be somewhere between seven and fourteen days.

None of the men who caught the disease were marked by small-pox, or vaccination; whether or not they had chicken-pox it is impossible to state. Those infected were eleven men and one boy; the disease did not resemble modified small-pox, or chicken-pox, any more than common small-pox, as will be shown.

All the cases were seen on the third day of the disease; they all complained of having suffered from headache and malaise, and of having felt ill for two days previously; there was no history of any rigor; temperature on the morning of admission was normal; no initial rashes of any kind could be detected. Simple erythema of a black skin is, of course, very
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difficult to detect, but there was nothing to indicate the presence of a primary rash, nor was there any indication of primary fever. The specific eruption began on the morning of the third day of the disease (first day of inspection); small papules were to be seen on the forehead, face and chest, also on the abdomen and back; these papules were rather sparsely scattered over the surface of the body in the localities indicated; by evening some of the papules were capped with vesicles; on the fourth day all had become vesicular; on the fifth day the fluid in the vesicles was opalescent, and umbilication had commenced; this umbilication of the vesicles, which occurred in most of the cases, was curiously unlike that of common small-pox, which is determined by a hair, a duct or a fibre; the umbilication in this case began by the formation of a minute scab in the centre of the vesicle; and once formed the umbilication was permanent; no umbilicated pustule burst its depressing band, and became hemispherical, as often happens in common small-pox. On the sixth day all the spots had become pustular, and some of those not already umbilicated were undergoing that process; others remained hemispherical till they dried; I do not think any of the pustules burst, but on the following day all were drying, and becoming covered with scabs; these scabs were not brown, but perfectly black.

By the seventeenth day all the scabs had fallen off leaving pink depressions, instead of the usual red elevations; these soon disappeared, leaving no permanent mark.

There was no general swelling of the skin either of the face, scalp or fingers, there was no shedding of the hair or nails, and no pustules were observed on the mucous membranes; one case, indeed, suffered from severe diarrhoea in the scabbing stage, but this may or may not have had any connection with the distribution of the rash. The pyrexia was not the least curious part of this disease.

It appears that the fever of the variety is highest when that of common small-pox is lowest; and when the fever of small-pox is highest there is no fever at all in the variety.

In the cases observed there was no sign of any initial pyrexia, or intermediate drop, nor was there anything corresponding to the suppurative fever of small-pox; temperature on the morning of the third day was about normal, at all events
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not above 99° F.; in the evening of that day it was 102·5°; the following morning temperature was normal, 98·4°; evening of the fourth day 103°; next morning normal; evening fifth day 103°; sixth day, morning normal, evening somewhat lower than previous evening; seventh day onwards the temperature did not rise above the normal limit.

Headache and malaise continued from the first day to the sixth day of the disease, after that the patients felt quite well.

All the cases conformed very closely to the above type of pyrexia, except one, who had no pyrexia at all at any time, but there were several wide differences in the rash in different cases, e.g., in one case the pustules were very large—nearly half an inch in diameter—and one of these formed a small cutaneous abscess. In the case of the boy above mentioned, the spots were very small and closely set all over the surface of the body, and must have numbered some thousands, but there was no general swelling of the skin; the rash in most cases did not appear on the backs of the hands; in one case the vesicles did not umbilicate.

The pulse throughout the cases was but little affected at any time and the respiration not at all.

Sufficient contrast with common small-pox has already been shown; it remains to contrast the disease with modified small-pox, and with chicken-pox; as regards the former it is enough to say that there was no initial fever or rash, and that the specific eruption completed all stages; as regards the latter, the eruption in most cases completed all the stages peculiar to small-pox undergoing umbilication and becoming pustular, while the temperature rose to 103°, rather high for chicken-pox; there was no sign of enlarged glands; also chicken-pox occurs in Somalis as a very different and much milder disease than the one above described. I have seen many cases of it in adult Somalis, and other Africans.

No cases were lost, nor were there any complications or sequelæ, except the case of severe diarrhœa above mentioned.

As regards the treatment of the cases no drugs were given except in the case of diarrhœa; the patients were fed on boiled rice and camel milk, and got on very well.

In order to control the epidemic, all cases were immediately and thoroughly isolated; and had their clothes boiled, and
themselves washed, before being allowed to return to camp; they were attended only by men who bore the marks of previous small-pox. Moreover, every one in camp was carefully inspected daily while the epidemic lasted; partly owing to these measures and partly to the comparative mildness of the disease the cases were limited to the number of twelve.