

NOTES ON THE TREATMENT OF SLEEPING SICKNESS
IN YEI SLEEPING SICKNESS CAMP, CONTINUED
UP TO APRIL, 1915.

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IN the previous notes on treatment compiled by the late Captain H. S. Ranken, V.C., R.A.M.C., last year, attention was drawn to two series of cases still under treatment, with Antimony and Salvarsan, and with Antimony and Atoxyl combined, the total of the two series numbering one hundred and forty-five persons, but it was pointed out that it was still premature to tabulate any results on these for another year. This period has now elapsed, and it is with these one hundred and forty-five cases that the following notes have to deal.

EXPLANATION OF TERMS USED.

In describing the condition of the patients the following relative terms have been used :—

Very Good. Good. Fair. Poor.

These terms cannot be said to correspond to any of the classical stages of the disease, but are found convenient for purposes of tabulation.

By *Good Condition* it is roughly meant that the patient has no outward signs of the disease and that he is in good physical and mental condition.

Very Good is used to express persons in exceptionally good condition and also for the persons who come to the camp in good condition but who have obviously improved.

By *Fair* is meant persons who are only moderately strong—physically and mentally, and who show some outward manifestation of their disease.

By *Poor Condition* is meant persons who are obviously going downhill, and including all in the most advanced stages of the disease.

FIRST SERIES.

Treatment with *Antimony* and *Salvarsan* combined.

These patients received 5 doses of one grain metallic antimony at three days' interval intravenously. Then 0·4 gramme salvarsan

also intravenously. Then 5 more doses of antimony as before. Then 0.4 gramme salvarsan. Then 5 further doses of antimony.

In all these cases the peripheral blood was examined at three-monthly intervals (six slides being examined).

Twenty-six selected persons were given the above course of treatment and with three exceptions they have all been under observation in the camp for over two years. Of these, 5 have died, 15 are in good condition, 4 are in fair condition, and 2 are in poor condition. Of the 15 in good condition, 1 was found to have trypanosomes in his blood five months after treatment had been omitted; he was given further treatment with atoxyl. He is still in good condition. Of the 2 said to be in fair condition, 1 after a year from treatment was an obvious case of "clinical relapse," although the blood results were always negative.

SECOND SERIES.

Treatment with *Antimony* and *Atoxyl*.

This series must be subdivided into two.

FIRST SUBDIVISION.

Twenty-three persons who were picked out as being in particularly good condition on admission were treated as follows:—

Five doses of antimony (one grain) at three days' interval. Then twelve doses (five-grain) of atoxyl at three days' interval. Then five further doses of antimony, Then a second course of atoxyl. Then a third course of antimony and a third course of atoxyl.

After this all treatment was permanently stopped. As before, the very large majority of these cases have been under observation for two years and many of them much longer.

Of these 23 cases, 1 has died, 2 are in very good condition (and 1 of these has shown distinct improvement), 14 are in good condition, 5 are in fair condition, and 1 is in poor condition.

THE SECOND SUBDIVISION.

These cases have received more or less continuous treatment with antimony and atoxyl for two years after admission. A definite scheme of treatment embracing the whole class cannot be given as this has varied a good deal according to the condition of the individual concerned.

But the following is a fairly typical example of the class as a whole:—

Five injections one grain of antimony at three days' interval. Six injections of atoxyl one gramme at ten days' interval. Rest for one month. Five further injections of antimony, 6 injections of atoxyl at twenty days' interval. One month's rest. Further course of 6 injections of antimony and then atoxyl.

After this, treatment was continued up to two years with atoxyl, the dose always being one gramme and intervals of one month's rest being given between the courses.

This sub-division comprises 96 cases. Of these 1 deserted from the camp, 21 have died, 37 are in good condition, 31 are in fair condition, and 6 are in poor condition.

PERCENTAGES.

(1) *Antimony* and *Salvarsan*.—In this class the percentage of persons at present in good condition is 53·8, and the percentage of deaths is 19·2.

(2) *Antimony* and *Atoxyl* (First Sub-division).—Percentage of persons in good condition is 69·5; percentage of deaths 4·3.

(3) *Antimony* and *Atoxyl* (Second Sub-division).—Percentage of persons in good condition is 38·3; percentage of deaths 21·5.

It must be taken into consideration that Classes 1 and 2 were persons specially selected as suitable for the treatment, whereas persons in Class 3 were not so selected, and also that the diet given to the patients cannot in any degree be called a generous one.

No attempt is being made in this note to draw any conclusions as to the results of the various treatments, as the late Captain Ranken, V.C., was most anxious that this should not be done prematurely.