Correspondence

(5) A sore in ano, where the sufferer and a man who had secondaries had been shut up in prison together for some months.

(6) A sore on the lip of a girl, on friendly terms with a man who had syphilis. No remarks.

Cases 2, 3 and 4 occurred in a warm, moist climate. May we suppose that in such a climate the organisms could exist longer on the damp skin than would be the case in a dry country? For none of these men had had a wound big enough to attract their attention. A warm, humid bed may be the explanation of the sores that one sees on the pubis, scrotum and on the dorsum or other exposed portions of the skin of the penis with no evidence of preliminary wound.

Syphilis innocentium is really important to individuals, for, if unrecognized, it may lead to grave injustice. And I imagine a good many cases are overlooked. The above are all I can fish up from my memory at the moment.

I remember reading years ago of a number of men being infected by a tattooist who, the dirty fellow, moistened his ink with spittle.

I am, etc.,

MARSHBURGH.

MOSQUITO-PROOFING OF BARRACKS OF BRITISH TROOPS IN INDIA.

TO THE EDITOR OF THE "JOURNAL OF THE ROYAL ARMY MEDICAL CORPS."

SIR,—With reference to my letter of November 1, 1927, on "Mosquito-proofing of Barracks of British Troops in India," the following extracts from the Report on the Health of the Army for the year 1926 are of considerable interest:

Page 90:

"A still further decline in the incidence of malaria in Lahore has followed the mosquito-proofing in 1925 of the British infantry barracks and British Military Hospital. The comparison figures are as follows:

<table>
<thead>
<tr>
<th>Year</th>
<th>Incidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>1924</td>
<td>1,088.4 per 1,000</td>
</tr>
<tr>
<td>1925</td>
<td>706.2 per 1,000</td>
</tr>
<tr>
<td>1926</td>
<td>613.5 per 1,000</td>
</tr>
</tbody>
</table>

And again, page 96:

"Mosquito-proofing of Barracks.—This is an effective, but expensive, anti-malarial measure. In proportion as 'cold-storage' is effectively carried out, the necessity for mosquito-proofing barracks will be diminished."

The results of mosquito-proofing the British infantry barracks in
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Lahore cantonments are shown by the following figures of admissions during the malarial season (August to October) of 1926:

<table>
<thead>
<tr>
<th>Troops protected by mosquito-wire gauze</th>
<th>Troops not protected</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Average strength</strong></td>
<td><strong>Admissions</strong></td>
</tr>
<tr>
<td>302</td>
<td>55</td>
</tr>
</tbody>
</table>

The apt expression "cold-storage" means the withdrawal of all British troops from malarial stations during the months of August, September and October, and sending them to Hill stations. The idea is admirable if carried out in the spirit of its intention, is a matter of high policy, and is in the hands of those who sit in the seats of the mighty.

From the outlook of the unenlightened one the proposition of "cold-storage" seems liable to be upset by:

1. Necessity to bring British troops down to the plains for various reasons that may arise.
2. Possibilities of a mobilization concentration scheme arising and causing the return of all British troops to the plains.
3. Cavalry and artillery will return to their plain stations in early October—necessary for training purposes.
4. Extension of malarial season until end of November according to vagaries of temperature and humidity figures for the year (in Lahore cantonments we looked on November 15 as about the nearest figure for banking on the end of the malarial season).
5. The month of July cannot be counted upon as malaria "free."

Now refer to "The Medical Department of the United States Army in the World War," as given in the Journal of the Royal Army Medical Corps for February of this year.

Pages 123 and 124:

"In cantonments the framed barracks were screened"—"Adequate screening was regarded as one of the most important features in the control of malaria." "It is estimated that the annual price which the United States pays as a result of 'paludism' is more than 100,000,000 dollars"—"800,000 men occupied camps where malaria was endemic." "In the Southern States 'paludism' costs annually 7 dollars per head" and "an expenditure of 5,600,000 dollars would have been justified." "The cost of the malarial campaign was 3,250,000 dollars and the results were considered excellent."

Thus the words from the Great Big Country where "expense" does not interfere with the far-sighted policy of spend now to save bigger expense.

What is the cost of "paludism" to the Indian Government for British troops alone? Include cost of hospital beds, drugs, medical and nursing staff, loss of training efficiency, invaliding, etc., for the 9,389 admissions for
malaria in India in 1926 (British troops) and get the Cost Accountants to make a bill of it. I expect it will be a considerable sum for a steady yearly expenditure.

I met an American lady in the north of India. She talked in the bright, brisk and efficient way American ladies do talk and concluded with the remark, “You Britishers in this country are way back behind the times. Why, in my country, we screen all our houses where malaria exists.” I could only reply with the quotation:

“And the end of the fight is a tombstone white
With the name of the late deceased.
The epitaph drear ‘A fool lies here,
Who tried to hustle the East.’”

Colchester, I am, etc.,
March 5, 1928.
N. J. C. Rutherford, Colonel.

Notice.

CHADWICK PUBLIC LECTURES, 1928: SPRING PROGRAMME.

Subjects of hygiene and sanitary science of special interest at the moment were discussed in the course of this Spring’s programme of Chadwick Public Lectures, which began in London on Thursday, February 16, at 5.15 p.m., when Sir William Hamer gave his first lecture of two on “Epidemiology in England during the Last Hundred Years,” in the Hastings Hall of the British Medical Association, Tavistock Square.

Sir William Collins, Chairman of the Chadwick Trustees, presided, and Sir William Hamer after stating general principles and irreducible facts, carried his story from the position a hundred years ago, through Hecker’s Appeal and Chadwick’s Sanitary Idea to the germ theory and considerations of specificity and evolution in disease.

On the following Thursday, February 23, at the same place and time, the chairman was Sir James Crichton-Browne and points of Sir William Hamer’s discourse were Epidemiological Discipline, Creighton’s History, the Great Influenzas of Recent Years, The Return to the Hippocratic Method, Sydenham’s Constitutions and the Need for a Unity of Opposites.

On Friday, March 30, at 8.15 p.m., the “Bossom Gift Lecture” for the advancement of sanitary science in the direction of healthier and more economic building materials and constructional methods, was given in the Lecture Hall of the Royal Institute of British Architects, by Dr. R. E. Stradling, Director of Building Research in the Department of Scientific and Industrial Research.

Dr. Stradling chose the intriguing title of “Balbus Built a Wall.”