

EXPERIMENT WITH A SUNLIGHT CLINIC.

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DURING the winter period 1938-39, a sunlight clinic was run at the Royal Victoria Hospital, Netley, with the object of giving a weekly irradiation with ultra-violet light to the children of families of R.A.M.C. personnel.

It was thought that this might be a valuable measure of prophylaxis against the common cold and other minor ailments common to children. The results have been gratifying and it is hoped that publication of these may stimulate interest and example in hospitals where apparatus is available.

STATISTICS.

Number of treatments given	773
Average number treated weekly	34
Duration of course	October 22, 1938, to March 23, 1939

Note.—The posting of families to other units resulted in marked difference in weekly figures which ranged from a maximum of 50 to a minimum of 12.

RESULTS.

Most of the children were already fit and all that can be said of these is that they developed a healthy and tanned appearance and, with one exception, were free from colds throughout the winter period.

One boy who had a history of delicate health from birth showed a marked improvement and his parents (the best judges!) were both grateful and enthusiastic. They stated that the boy's appetite and general activity were improved and that it was the first winter that he had not had persistent coughs and colds.

In another family where the children were catarrhal a marked improvement was obtained in the specific condition and in the general health.

TECHNIQUE ADOPTED.

A long flame-cored carbon arc lamp was used. Circles were painted on the floor with radii of 40, 36, and 32 inches respectively from a point taken by plumb line from the burner. This permitted of multiple treatments, as many as ten children being treated at the same time. Radiant heat baths were placed in the cubicle to maintain a comfortable temperature.

The children were stripped except for knickers and shoes and were made to wear goggles (the latter borrowed from the Hospital Quartermaster's P.A.D. stock!). In the case of babies (between 1 and 2 years) a separate clinic was run and the mother was in attendance. The baby sat on the mother's lap and where there was difficulty in making the child wear goggles

the mother was instructed to hold a piece of black X-ray paper between the lamp and the child's face.

Dosage was strictly progressive and is indicated by the following table :—

With Long Flame-Cored Carbon Arc.

1st treatment :	1 minute to back and front at	40 inches.
2nd	“ “ “ “	38 “
3rd	“ “ “ “	36 “

Time increased thereafter by $\frac{1}{2}$ minute each consecutive exposure until a maximum of 5 minutes to front and back was being given.

Alternative Table with Alpine Sun Mercury Vapour Lamp.

1st treatment : 1 minute to back and front at 36 inches. Increase weekly by 20 seconds until 3 minutes reached, and remain at this.

CONCLUSIONS.

It would seem that a sunshine clinic serves a good purpose at an age when the subject requires biological stimulation and at a period when this is, in many instances, subnormal.

The fact that a flaming arc lamp may not be available will prevent multiple treatments being undertaken and thus limit the numbers it is possible to treat.

Most hospitals have an alpine sun mercury vapour lamp. It is suggested that in this case any subnormal or weakly children should be selected to undergo a tonic course, the children to be chosen by the families' M.O. with the co-operation of the parents.

In conclusion it must be noted that the personal element must be provided for. The fair child requires (or will tolerate) less than the dark child. The dosage should be gradually increased until pigmentation or a barely perceptible erythema is obtained.

A CASE OF MYASTHENIA GRAVIS.

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THE patient, a Greek aged 23, was the wife of a Flight Serjeant in the R.A.F. Her occupation before her recent marriage was a dressmaker.

On her 21st birthday she was in excellent health, but shortly afterwards suffered from severe occipital headaches. A year later she noticed that her right ring finger would tire quickly when she was engaged in dressmaking. This weakness became intensified the longer she continued to use the finger, but regained its strength after a short rest. A fortnight later she noticed her right hand begin to drop and the left ring finger became similarly affected to the right. In a short time the fingers of both hands were affected and she