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Editorial Index

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Cerebro-Spinal Meningitis

Hands memo by Dr. Ross on points raised by
Dr. Heaner. Includes schedule of cases
reported at Native Civil Hospital bet 1906
+ 1912.

H. Diddens

H. S. R.

~~Mr. Bittner~~
Mr. Newell

107-~~117~~.3

It appears to me that in view of their previous experience ~~that~~ Mrs Ross & Shirene were quite right in preferring the Gruber treatment. They also, or rather one of them had the wisdom (a courage) to put this belief to the test in his own case, & with most happy results.

See also number 60761 (below) for Ch Sec, note
preceding dust block of end to 60761. I presume that
whatever is found in 60761 are in faint, too,
should go to Dr. Steamer AF

Heaven
God, spirit AF 15th dir 5000

at neck
4-8 15/16

Re Fiddian

Extract from minutes of board meeting of the
TBC on the 3rd Oct 1914 -

Professor Soper stated, in connection with
the return of cases of another spinal meningitis in
the TBC, that the outbreak had been very serious
as far as the natives were concerned, particularly because
it affected adults and interfered with the labor supply.
Dr Ross & others had made very careful examinations
and found a large percentage of the organisms in the
blood. Huguenin's serum had proved of very little use.

monthly action
proposed for the

M. B. Murray

Mr Head

as member)

Socia 6197

No action necessary except

AF 20/11/14

to rule
by 2nd Oct
20/11/14

comes under date 10/11/14 (with report) 26/11/14

EAST AFRICA PROTECTORATE

No. 394



GOVERNMENT HOUSE
NAIROBI
BRITISH EAST AFRICA.
Ric. 9 DEC 1913.

November 12th 1913.

Sir,

*AS
30877*

I have the honour to acknowledge the receipt of your despatch No. 800 of the 24th of September on the subject of the epidemic of Cerebro-Spinal Meningitis and to transmit herewith a copy of a Memorandum by Dr. P. H. Ross, Bacteriologist, relating to the points raised by Dr. Fleischer.

- J. 40761*
2. A full report on the matter by Dr. Ross and Dr. Shircore has already been forwarded to you in my despatch No. 835 of the 30th ultim.
 3. With reference to the concluding paragraph of Dr. Ross' Memorandum I enclose a schedule showing the number of cases of this disease as reported at the Native Civil Hospital since 1906.
 4. I am still not in possession of Professor Simpson's views on the matter.

I have the honour to be,

Sit,

Your humble, obedient servant,

C. G. Bowring

In the absence of the GOVERNOR.

THE RIGHT HONOURABLE

LEWIS

P.C., M.P..

SECRETARY OF STATE FOR THE COLONIES,

44 Despatch No 8940 12/11/15

The Laboratory

Nairobi,

October 29th, 1915.

Name.

X X X X X X X X

(2) As regards the antimeningoceleum serum I would submit the following remarks.

(3) On the outbreak of the disease here Dr. Haran, Acting P.M.O., wired for a certain number of doses of Flexner and Leibling's serum.

(4) There was naturally a long delay before the serum arrived. When it did arrive these were the brands.

(a) Lister Institute and (b) Burroughs and Wellcome's.

(5) The arrival of this serum has been looked forward to with the greatest impatience by Dr. Shiroore and myself and immediately on its arrival it was in use ^{but} by Dr. Shiroore.

(6) During the period of waiting for the arrival of this serum Dr. Shiroore had tried intramuscular injections of Seconin.

(7) The details of the results of treatment with serum and with seconin are given in the ~~same~~ paper by Dr. Shiroore and myself of which a copy has already been sent to you. Here it will be perhaps sufficient to say that our high hopes of the serum were entirely dashed to such an extent that when Dr. Shiroore contracted the disease it did not enter his head before he became unconscious at the hands of any of us who were attending him after he lost consciousness to use the serum, but he was given doses of Seconin.

(8) Since Dr. Ghircore's illness a paper by Baschek has appeared and it now seems that we might have got better results by giving a preliminary subcutaneous injection of the serum. I would point out that I have never before this very recent publication seen any reference either in English or Continental literature to this method of treatment and the fact remains that the use of the serum in the manner described by the instructions accompanying the tubes and in all the available literature gave such deplorable results that we did not feel justified in continuing its use.

(9) A further point in connection with treatment is that in a series of 40 cases we found that we got a percentage of septicemic cases very much higher than previously described in the literature. It seems reasonable to expect that serum injected into the cerebro spinal canal would have a minimum amount of influence on a septicemic case of the disease.

(10) I note that there is no conflict between Prof. Flammer's remarks on the method of spread of the disease and the contents of the leaflet which under your instructions I wrote for publication.

(11) As regards research on the subject of the spread of the disease all that we had time to do in that direction has been included in the paper by Dr. Ghircore and myself referred to above. There was material to occupy all the time of one man but what we could do had to take its chance with the routine work of the Laboratory.

(12) As regards para. 2 of Mr. Lambert's letter I would point out that Dr. Ghircore found mention by Dr. Maran of cases at the Civil Hospital in 1906. I was absent at the time on leave so know nothing personally of those cases.

I have etc.

As/ Phillip H. Ross.
Bacteriologist

Number of cases of meningitis from 1906-12
admitted to Civil Hospital, Nairobi.

<u>Year</u>	<u>Cases</u>	<u>Deaths</u>
1906	3	3
1907	10	10
1908	15	14
1909	3	2
1910	2	2
1911	-	1
1912	1	1
	56.	34.