

In spite of the above unsatisfactory conditions, adventure and excitement are not altogether absent. Years ago a pioneer monkey decided that the Dufferin Hospital provided food and drink in plenty, with a minimum of foraging, so he made his home on the surrounding roofs. His sons were taught to spit fiery blasts and to bare their teeth at creatures dressed in skirts or sarees, but to leap to safety on sight of the mightier beings in trousers. The intuition has been so perfected through generations of monkey folklore that now-a-days the monkeys, whose numbers have increased to over fifty, are the virtual rulers of the compound and from the monkey's point of view, the staff and patients are only there on sufferance. All the buildings have had to be fitted with wire netting to keep the marauders out, so that contrary to usual procedure, those in the Hospital live in cages. In spite of this protection, latches are opened and an attack is skilfully and successfully organised to the nearest point of vantage, be it a milk safe or patient's locker containing sweetmeats. A fierce chattering scatters every nurse in sight, patient's heads disappear beneath pillows or any available covering and the raiders take their choice of the dainties at hand, passing out from one to another, hand to hand, just what they particularly fancy.

RAW APPLE TREATMENT FOR BACILLARY DYSENTERY

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I have been asked to write a short account on our experiments with 'Grated apple' for Bacillary dysentery and Infantile diarrhoea.

The observations given are purely from a nursing point of view. What we noticed about each case as the different treatments were tried. The treatment is only in its experimental stage at present in this hospital. We have treated three cases so far. One a Bacillary dysentery and two the causes of which have been difficult to trace. Only one of the three cases had been treated solely with 'Apple'. The other two had the more orthodox methods tried first. You will see that the one treated with 'Apple' only was well and on normal feeds within five days from the commencement of the treatment.

Method of Preparing the Apple

The apple is peeled and finely grated and served. If kept it colours a little, but discoloration does not affect its action.

It should be prepared freshly daily, and the usual hygienic precautions taken.

I am giving a very brief account or rather summary of the three cases.

Procedure of treatment when only 'Apples' are used.

1. Child put on sterile water and normal saline ad. lib. given orally for 12 hours. (If very dehydrated, normal saline given i. v. or subcutaneously.)
2. Next day the child is given small feeds of whey, and sterile water and normal saline are given between the whey feeds. Grated apple vi-vii oz (less for a child under 4 months) given orally in 24 hours. It works out to about one drachm to $\frac{1}{2}$ drachm 4 hourly.

3. By the third or fourth day if the child is going to respond to 'Apple' treatment the stools are less in number, and begin to form. The child is now put on to weak milk feeds in place of the whey and gradually increased to the normal feed. The 'Grated apple' is continued until the stools are quite formed and normal.

Summary of cases (A nurse's observations)

Case I. A male child (aet. 7 months) admitted on 24-3-35. Child just started teething. He was admitted with the history of having had diarrhoea for two months. 8-9 stools daily, liquid, greenish, containing mucus and streaked with blood. There was a history of dysentery which had been treated with castor oil emulsion and Dover's powders without response.

Examination showed:—

The abdomen distended, soft and tender.

The colon was thickened.

The liver was enlarged, it was firm, hard and tender.

A stool was sent down for examination for A. & B. dysentery on admission, and the child was (1) started on emetine grs. $\frac{1}{12}$ O. N. The condition of the liver led us to believe that the chronic dysentery might be of amoebic origin. After 5 injections there was no improvement. The child was peevish and lost weight. Still had 7-9 stools daily, unhealthy and offensive.

(2) For two days the patient was given Bacteriophage 3 cc. 4 hourly *orally*, and saline bowel washes once daily for 5 days. Still no improvement. On 7-4-35 the child had 5 stools semi-formed, greenish, very offensive, full of mucus and blood stained. A specimen of this was sent for examination and the report showed Bacillary dysentery exudate.

(3) 'Grated apple' 1 oz. was given 4 hourly *orally* for 6 doses daily and the child put back on to whey feeds. By 12-4-35 the patient was passing 1-2 stools daily, formed, pale yellow with no blood or mucus. He gained weight and continued to do well and was gradually put on the normal diet and was discharged on 8-5-35 with no further recurrence of his previous symptoms.

Case II. A female child (aet. 16 months) admitted on 6-7-35.

History: From 29-6-35 the child was passing 15-16 stools with mucus and a small quantity of bright coloured blood. Stools watery, small and accompanied by tormina and tenesmus. Temp: up to 102 started two days later.

Treatment before admission: Treated principally with castor oil emulsion—stools reduced in number to 7-8 daily, but no change in character.

Treatment after admission, 6-7-35:—

(1) On the 1st day the child was given only normal saline and sterile water ad lib. *orally*, also 2 cc. Bacteriophage 4 hourly given *orally* no change after 2 days treatment.

(2) Next saline bowel washes were given B. D. and Sodii and S. S. Mag. Sulph. mixture 1 drachm hourly. Whey feeds were given in small quantities. Still the child's general condition remained unchanged.

(3) All previous treatment stopped and the child put on to 'Grated apple' $1\frac{1}{2}$ oz. 4 hourly and whey feeds. Within a day there was a change in the stools, and three days later she was having 2-3 normal stools daily. Her diet was increased gradually to milk diet. She is now up and about convalescing satisfactorily. All stool reports were negative to A. and B. dysentery.

Case III. *Treated solely on 'Grated Apple'*. The patient was a 7 months premature boy. He was born on 4-4-35. He has run a continuous temperature ranging from 99-104 since two weeks old.

History: Admitted to hospital on 7-7-35 with a history of fever, vomiting, and diarrhoea for the past 3 weeks. He was passing 16-20 stools daily, greenish liquid with mucus and very offensive, no blood.

Examination:—Abdomen very tense and distended but not markedly tender.

The child was cyanosed, very dehydrated and his condition was critical. He was given 4 oz. of normal saline intraperitoneally.

On the 1st day as vomiting was troublesome he was given only normal saline and sterile water ad lib. orally.

On 8-7-35 he was given 'Grated Apple' $\frac{1}{2}$ drachm, 4 hourly with whey feeds 3 hourly, and plenty of normal saline to drink. By the evening he had stopped vomiting. By the 5th day he had 1 formed normal stool. He is now on normal feeds and progressing well.

Laboratory Experiment

We tried to discover what effect the 'Apple' had on the Bacillary germ, by putting some 'Grated apple' with a Bacillary culture, but there was no change noticed.

From this it appears that the process of digestion must cause some change in the apple to affect the dysentery germ.

We have tried 'Grated Apple' on a few Amoebic dysenteries, but with very poor results.

From the above experiments it would appear that this treatment is successful in cases of diarrhoea of unknown origin in teething infants and also in some cases of Bacillary dysentery.

Two or three apples daily, costing about two or three annas is all that is required. This seems a cheap, simple and efficacious treatment, requiring no skilled administration. It is given orally in very small doses. There should be no difficulty in trying this method in village work. It might be the means of saving many poor village babies.

NOTE.—*The apple must be prepared according to instructions.*

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ADOLESCENCE

Some Notes from a Lecture given by

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Contrary to the belief of the average school-master or mistress, the problems of adolescence rely upon what has happened to the child before the age of seven, in fact a person's whole life will react to the pattern of their personality before that age, and this can be faced, if it is worked out.