a lecture in Paris to a large audience in the great amphitheatre of the Sorbonne. In 1928, he succeeded in creating a Mental Hygiene Foundation for the collection and distribution of the necessary resources.

In 1930, Beers was the mainspring of the International Mental Hygiene Congress in Washington, where the representatives of 50 nations met. In most of them there already existed a mental hygiene society or committee. The International Mental Hygiene Committee created at this Congress has convoked for 1935 in Paris a Second International Mental Hygiene Congress, in the preparations for which Beers is already engaged in Europe.

One on occasion when Beers was being congratulated on his personal success and on that of the great cause to which he had devoted his life, it was remarked that a prophet is seldom honoured in his own country; and that it is still more rare for him to see his dream come true throughout the world. This has been the happy lot of Beers, and it would seem that fate has wished to give him the most dazzling compensation for his past sufferings, and the best of rewards for his noble ardour.

(Communicated by the Secretariat of the League of Red Cross Societies, 2, Avenue, Velasquez, Paris, VIIIc.)

THE THREAD WORM

(Reproduced by courtesy of the League of Red Cross Societies.)

The thread worm (oxyuris vermicularis), seat worm, or pin worm is a most common parasite in the intestines of children in all countries. The females, which are much larger and more numerous than the males, may be detected as white, slowly-moving short threads in the motions. These threads can be seen with the naked eye, whereas the male parasite is so small that it is not easily found without the aid of a magnifying glass.

The female has a long, tapering and pointed tail. The tail of the male on the other hand ends abruptly, and is coiled up into a sort of spiral after death. In both sexes the head end is much pointed. No intermediate host is required. The whole life cycle is completed by re-infection, the parasites and their eggs escaping with the motions and being conveyed by dirty scratching fingers to the mouth.

When an egg is swallowed, the young worm escapes from its shell into the stomach. From there it passes into the
small intestines where it undergoes a succession of moults and attains sexual maturity. After mating, the male worm usually dies and passes out with the motions, but the impregnated female remains in the large intestines till her eggs are matured. She then descends to the lower end of the intestine, where she and some of her eggs are expelled in the motions. Others of her sisters escape spontaneously by wriggling when the host is warm in bed.

This escape of the adult female sets up irritation which leads to scratching of the affected parts. The eggs and fragments of the adult worm may thus become entangled in the child’s finger nails which carry infection to the mouth. The child who has developed the habit of sucking his thumbs and biting his nails is particularly likely to keep up infection in this way.

The eczema favoured by this scratching is not the only troublesome symptom. The infected child may be hysterical, anemic and subject to convulsions and perversions of appetite. It is therefore most desirable that all the worms be destroyed.

Once a child is infected with worms, which come to maturity in successive swarms over a period of several weeks, it is necessary to continue treatment for some time, as measures restricted to a day or two will only eliminate one batch of worms. To prevent the child infecting itself, he should be made to wear gloves at night, the finger nails should be kept short and clean, and thumb-sucking and nail-biting discouraged. He should not sleep with other children lest he infect them.

Every night and, later, every second or third night, an enema should be given consisting of salt and water, one ounce of salt to the pint. Another effective enema is made by boiling 1 oz. of quassia chips for ten minutes in a pint of water, sufficient water being added from time to time to keep the final amount at one pint. The solution is then strained and injected while still warm. Only 5 ozs. should thus be injected at a time.

It is hopeless to attempt to reach the upper parts of the large intestine, where most of the worms are lodged, by giving large enemas. If frequent small enemas are given, as indicated above, successive
batches of the worm will be removed from the lower intestine, and if
re-infection does not take place, the life cycle of the parasite will
be broken in four to six weeks. Nocturnal irritation is prevented by
the application of weak mercurial ointment to the inflamed parts or
by sponging them with a weak carbolic lotion.

In families and institutions in which this troublesome condition has
become epidemic, it is necessary to observe the strictest cleanliness with
regard to underclothing, bed-linen and towels. Privies must be kept
strictly clean, and it may be necessary to cut raw fruit and vegetables
temporarily out of the dietary as they are apt to carry the infection.
The children’s hands should be washed thoroughly before each meal.
If all these measures are conscientiously practised, there is no reason
why such epidemics should become chronic.

Common Colds, Grippe, Intestinal Flu, Nature’s S.O.S. Signal

A vicarious elimination of toxins through some
portion of the mucous membrane, which fails to
be eliminated through the natural channels.

A teaspoonful of

SALVITAE

in a glassful of water every four hours,
stimulates elimination through the natural
channels, prevents toxic absorption,
relieves congestion, allays fever, sterilizes
the Intestinal and Urinary tract and
prevents the numerous complications.

Samples and literature to the medical profession on
application to Sole Agents in India:

S. Ml. Isag, c/o Muller, Maclean & Company,
8 Old Court House Corner, Calcutta; M. A. Wadia,
c/o Muller, Maclean & Company, Theres Bldg.,
Apolo Bandar, Bombay; G. Y. Knight & Company,
21 Lewis Street, Rangoon, British Burma; Wilson
& Company, 5-8 Jehangi St., George Town, Madras