

ed nurses and the American Nurses Association, in forming an affiliation with the Red Cross pledged itself, out of a membership of more than twenty thousand to provide a nursing service in time of war or great national calamity of any kind. The Red Cross Nursing Service in its present form has proved itself to be most efficient, and this new plan has therefore come as a shock and disappointment to the nurses enrolled in it. Nurses would be the last people in the world to object to giving systematic instruction in first aid and hygienic requirements to any women who were willing to learn, but to give them a standing and a uniform among the Red Cross Nurses will be only to bring back the confusion which has been partly cleared up between trained nurses and untrained ones. The editor says,

"We do not doubt the good intentions of those who were responsible for this idea, but it is another instance of how impossible it is for anyone outside of the nursing profession to appreciate the confusion which would arise, and the great calamity of having in the field two classes of women workers in uniform under the Red Cross emblem. Such service as untrained people can give in time of great calamity, the accumulation and distribution of stores, clothing, etc., can perfectly well be done by persons who have received special instruction for such work, but they need not wear a uniform. The brassard would give sufficient distinction."

It is to be hoped that when the plan attains its final form it will be found to be a concession to the nurses' desires.

BOOK REVIEWS.

SLEEPING SICKNESS *

By A. J. BEST.

NO event in the pathological world has attracted more attention in recent years than the appalling epidemic of sleeping sickness in our colonies and dependencies in East and Central Africa. The interest which it arouses is only surpassed by the ignorance which is generally displayed in the popular press in references to the phenomenon. For this ignorance excuses may be made. The scientific knowledge of the subject has been quite recently accumulated; possible hypotheses to account for this or that feature of the disease and its distribution have been put forward in bewildering profusion, only to be withdrawn when the light of further knowledge and research has rendered them untenable. But a still more cogent reason for popular ignorance is that

* "Sleeping Sickness" pp. 56. By F. M. Sandwith, M.D. published for the Research Defence Society by Messrs Macmillan. Price 4d.

there was not to our knowledge any tolerably full and straight forward account of sleeping sickness available, intelligible to the lay mind and yet thoroughly scientific and well informed. Such excuses will not suffice in the future. Although doubtless much still remains to be discovered, nevertheless the labours of able and self-sacrificing men and women, to whom the world owes a debt it can never repay, have brought together a body of firmly established fact with regard to sleeping sickness, its historical development and geographical distribution, the means of infection and the symptoms and treatment of the disease, and, most important of all, of the best methods of arresting the terrible scourge. With all these varied aspects, the admirable pamphlet before us, published at a price which brings it within the reach of all, deals in an able and lucid manner, at once concise and adequate.

It may perhaps stimulate some of our readers to procure and peruse this pamphlet if we attempt here to summarize the principal facts with regard to sleeping sickness.

In West Africa, especially in the Congo basin, along the Guinea Coast and in Senegal the existence of the disease has long been known. It was first mentioned in a work of travel published in London in 1742. For generations it remained within comparatively narrow limits. The insecurity of travel and the absence of all aids to locomotion effectively prevented its general distribution. But with the coming of the European and the peaceful administration and steamship and railway services which he brought with him, the conditions rapidly changed. It is now believed that Stanley's great journey with a band of 300 followers from the Congo to the Albert Nyanza was the means which first introduced the scourge to East Africa. Once firmly established in the highly favourable ground around the great lakes, it spread with devastating rapidity. Hundreds of villages were deserted by their few surviving inhabitants and the shadow of death lay over the loveliest and most fertile regions of the world.

We cannot here describe the heroic and brilliant labours of the devoted men who have given their time and too often their lives to the study of the disease. Briefly stated the following are the chief facts established. Sleeping sickness is due to the presence in the blood and the cerebro-spinal fluid of a minute parasite, the trypanosome, transmitted to the victim by the bite of a species of tsetse fly the "*Glossina palpalis*." The course of the disease may be rapid but is usually slow, the first part to be affected being the glands of the neck. The lethargy and prostration which have given the disease its name are usually

ate in appearing. Europeans are by no means immune, though their clothing protects them from bites to some extent and their white skin is not so attractive to the tsetse as the dark skin and exposed bodies of the natives. Recent European cases seem to hold out the hope that the disease may prove to be curable, but however desirable this may in the case of individual patients, it is not of very much practical importance, as medical treatment for the teeming millions of Africa is clearly impossible. Of much greater interest are the methods recommended and now partially adopted for its prevention. Antitoxic serums have so far proved to be useless, and the complete destruction of the tsetse is an impossible task. The chief hope lies in the fact that the fly must first bite an infected person or animal before it is capable of infecting another. The segregation of cases in areas where there are no flies has been adopted in various localities with admirable results. There is still some doubt as to whether wild game are an important reservoir of the parasite. Should this be definitely proved no sentimental considerations should be allowed to stand in the way of a complete and rapid destruction of the game. The fly only exists in the neighbourhood of water and much good work has been done in removing villages from the banks of lakes and rivers, and in destroying the flies which swarm at fords and landing stages and other places frequented by large numbers of natives. Many important trade routes are now carefully supervised and infected men are prevented from wandering long distances in search of famous witch-doctors. The darkest cloud on the horizon at the present time is the fact, recently discovered, that the South African tsetse the "*Glossina morsitans*", which occurs in enormous numbers in Rhodesia, Nyassaland and other colonies, is capable of carrying the parasite and transmitting it to man. But in general the prospects are hopeful and it seems not unreasonable to anticipate that in the well administered regions of the Chartered Company with the expert knowledge now available, means may be found to avert the terrible calamity of a great epidemic.

All the European powers with possessions in tropical Africa have co-operated in the great work of research and prevention. It is a moving thought that while in Europe the great powers spend vast sums and deplete the energy of their people in preparing to fight one another, in the distant jungles of Africa amidst savage and uncivilized races, all unite in the far nobler work of fighting the two universal and immemorial foes of humanity, disease and ignorance.