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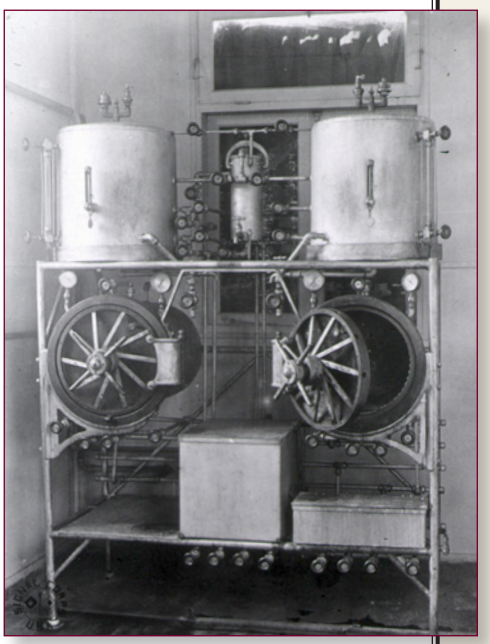

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Editorial

Medical Progress in Rhode Island

The present war teaches, as it has never been taught before, the value of organized effort. From the munitions plants at home to the trenches at the front all are working as parts of the definite plan. Success depends on efficiency, which is the result of coordination of effort.

Similarly, in the unending war which humanity is waging against disease, the greatest advances are made when the trained troops, the medical profession, work in harmony and according to a definite plan. To the work of great clinics, under the guidance of men of especial ability and training, we may ascribe the greatest progress against the enemy.

In Rhode Island the work of the profession is distinctly lacking in the organization of effort, which spells efficiency and progress. Several factors contribute to this condition. The most important of these is the absence of the unifying and stimulating influence of a local medical school. Another is the perhaps unfortunate proximity of Boston. This encourages local man to sit at the feet of their Massachusetts colleagues and gather from them new ideas and principles instead of working these out for themselves amid the wealth of material presented by the clinics of the state.

… It is a pity that the larger hospitals do not make a more definite provision for the carrying on of clinical and laboratory research. Clinical material is here in abundance and men of training and enthusiasm are not lacking. By encouraging and practically providing for research the hospitals of this state will vastly increase their usefulness in the community and to mankind and will place the medical battalions of Rhode Island where they should be, in the forefront of the battle against the host of death.

Letter to the Editor

Instruments for the European War

Editor's note: No new donations have been made since last month by the medical profession of the state. There were sent in the last shipment surgical instruments… one major operating set, one minor operating set, and a pocket case. The great necessity for thermometers is well described in the letter below.

The following extracts are from a letter acknowledging receipt of instruments given as being of interest to readers.

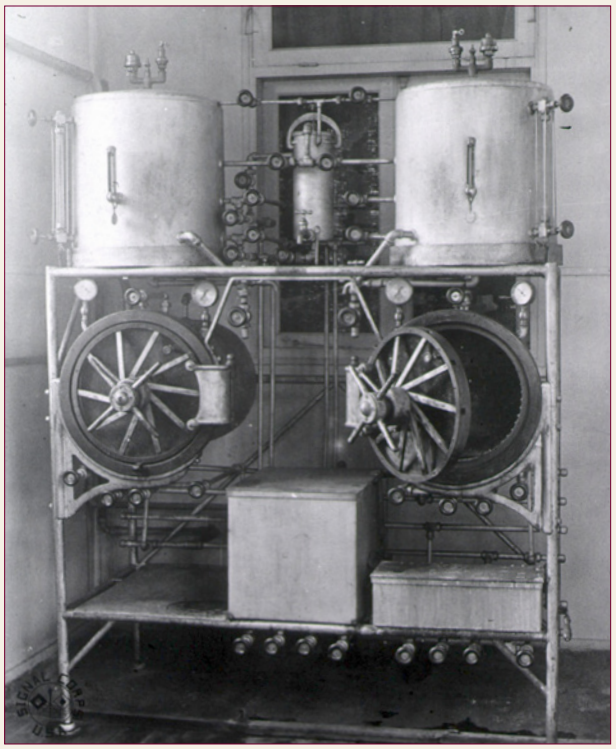
To the Rhode Island Medical Society:

I must mention particularly the gratitude expressed for the surgical instruments. There is a great dearth of them, for they are, alas, much used and the consequent constant sterilizing is very hard on them. Most doctors are using their own, many of them can ill afford to replace or add to them, and all such articles are keenly appreciated. There is a tremendous need for thermometers – those that are divided into centigrade degrees; they have increased 300% in price and decreased in quality as much. In the hospitals we consider a calamity whenever one of them in our charge breaks and if some could be given they would receive a particularly warm welcome from the nurses, who bear all the brunt of the wear and tear of thermometers.

Metallic iodine is also in great request, should it ever come your way.

The operating rooms can make their own solutions as the need occurs and the tincture never has time to grow old and noxious.

Yours very gratefully,
Margaret Gaulin



Sterilizing machines for surgical instruments, dressings and water in a French hospital in World War I.

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"If you want to know the road ahead inquire of one who has travelled it..."
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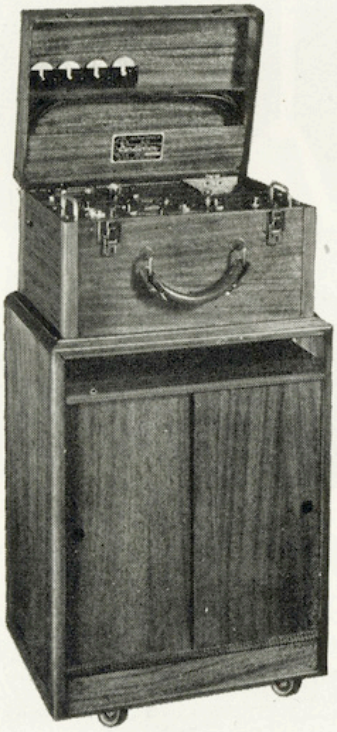

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Hookworm Disease in Rhode Island

ALEX M. BURGESS, MD; PERCY D. MEADER, SCM

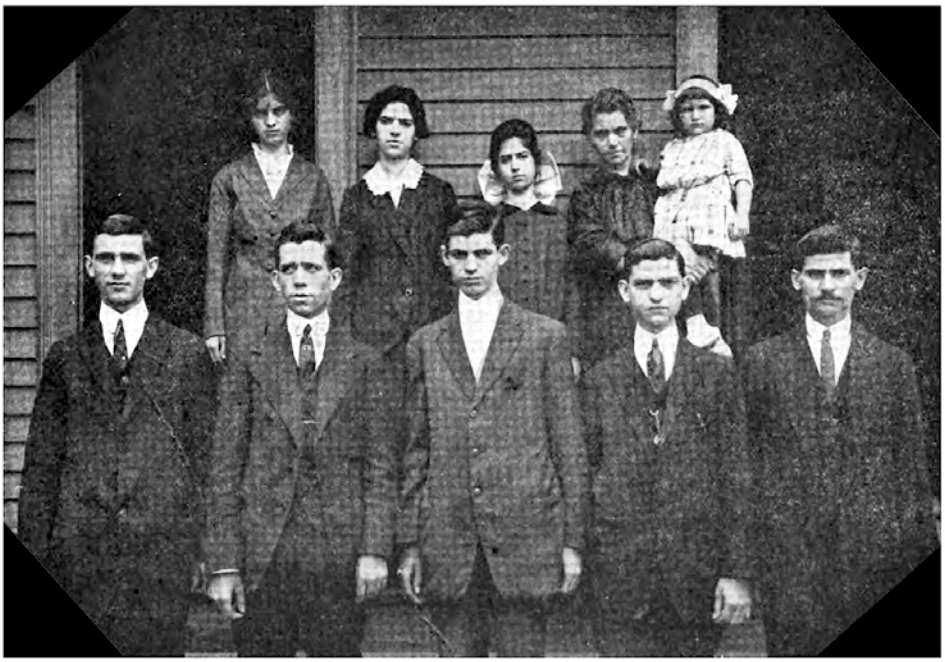
The occurrence of hookworm infection among people who may be considered as permanent residents of the state of Rhode Island is, in the judgment of the writers, of sufficient interest to justify a brief report. Of the cases of the disease previously observed in New England, so far as can be determined, have occurred in persons who have recently come from parts of the world were the parasite is known to be common. Of the eight patients mentioned in this report, however, four had lived in Providence for two years when the diagnosis was made, and two had arrived very recently.

There can be no doubt that persons with the disease are constantly entering this State. The last report of the United States Commissioner General of Immigration states that in the year ending June 30, 1914, over nine thousand aliens were admitted through the port of Providence. The majority of the immigrants are Portuguese, French, Italian and Armenians. They sail principally from Marseilles, Naples, Gibraltar, Lisbon and the Azores. Since they come from regions where hookworm disease is common, it is reasonable to suppose that the proportion of infected persons is not negligible. That these cases usually remain unrecognized is probably because practitioners in this region are not in the habit of suspecting hookworm on account of its non-occurrence in natives. While it is in general true that this disease is very rare in New England, it is safe to say that if the actual number of cases existing within the boundaries of the state could be revealed, it would be found to be surprisingly large.

The following five cases came in the practice of one of the writers, and were all members of an Italian family. All but one had lived two years in Providence.

This family consists of the mother, age 52, five sons and three daughters, and the wife and three small children of the eldest son. The father and another son remained in Brazil. The eldest son, Angelo, age 30, and his family arrived in this country from Brazil one year before he came under our observation. The other members of the family emigrated from Brazil two years previous. All had resided there since 1909, at which time they left Italy. The sons, the youngest of whom was nineteen years old, were weavers employed in the Atlantic Mills in Olneyville. Two older daughters were also employed in the mills, and the youngest, aged thirteen years, attended school. They lived in the Federal Hill district.

The oldest son, Angelo, was first seen professionally on March 27, 1915. He was apparently recovering from a slight failure of cardiac compensation, and gave a history of 40 days recently spent in the Rhode Island Hospital with a diagnosis of pneumonia and bronchitis. A routine blood count at this time disclosed an eosinophilia of 23% and a species of feces was requested. As the specimen was not saved, the question of internal parasites was for some time forgotten, and it was not until just three months later, when called to see the youngest son, Pasquale, who complained of persistent abdominal pain and tenderness, that the suspicion of



M——FAMILY

*Giuseppe *Carmela Pietro Rosina *Pasquale Mary Mother Lucia *Gregorio *Angelo

*Infected with Hookworm

hookworm infection was entertained. A specimen of feces from Pasquale confirmed the diagnosis in his case by showing living uncinaria embryos and ova.

A systematic examination of the entire family was undertaken at once, with the results tabulated below. With the exception of the mother and wife of the oldest son, all were of slender build and several were markedly anaemic. It seemed not improbable that all might have suffered previously from uncianariasis, and the examination of the feces and blood were made to determine what individuals were at the time infected with the parasite.

TABLE I.

Preliminary examinations July 1 and 2, 1915

Name.	Eosinophile count.	Hookworm ova.	Other parasites.
Carmela	26%	+	+
Pietro	9%	—	—
Lucia	3½%	—	—
Mary	8½%	—	—
Mother	8%	—	—
Lina	7%	—	—
Gregorio	23½%	+	+
Michelina	3%	—	—
Giuseppe	....	+	—
Rosina	16½%	—	—
Josè	22%	—	—
Pasquale	22%	+	+
Angelo	9%	+	—

Treatment

The treatment carried out was that recommended by Ferrell. In the evening before the day of treatment very little supper was allowed and one ounce of $MgS0_4$ was given. The following morning, as soon as the bowels had acted, thymol (20 grains) and an equal amount of lactose was given in capsules. The patient was directed to lie for a half hour on his right side to facilitate the passage of the drug into the small intestine. Two hours after the first dose of thymol, a second of 30 grains was given and the patient again directed to lie on his right side. Two hours afterwards, a second ounce of $MgS0_4$ was given. No food except a little water or strong coffee was allowed until the second dose of salts had acted.

The first dose of $MgS0_4$ is given to clear from the small intestine all mucus that may protect the parasites. The second does of $MgS0_4$ clears away the toxic thymol before it can be absorbed, and takes with it the paralyzed parasites which have let go their hold on the intestinal wall. All feces were saved and strained through gauze to recover the adult worms.

Carmela, Giuseppe, and Gregorio remained in good health up to January 18, 1916, when they were last seen. As the other two had not shown any definite symptoms of their infection, the effect from the treatment was of course not striking.

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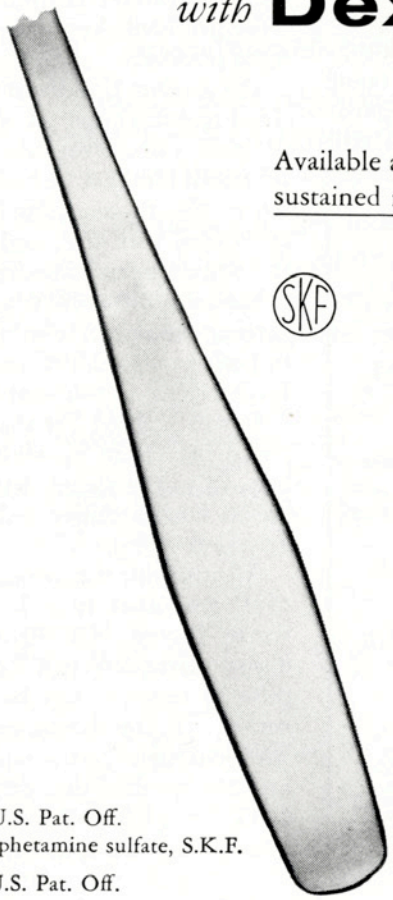

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News

Rhode Island Hospital Club hears speaker on 'Romance and Terror of Aerial Warfare'

The twenty-first annual dinner of the **Rhode Island Hospital Club** was held at the Turks Head Building, February 20, 1917. Dinner was served at 8 p.m. and was attended by about 160 members and guests.

LIBRARY OF CONGRESS

The president of the club, **Dr. Arthur T. Jones**, presided and introduced as the speaker of the evening Cosmo Hamilton. Mr. Hamilton gave an intensely interesting address on "The Romance and Terror of Aerial Warfare" and regaled his hearers with amusing incidents and intimate touches of this thrilling profession.

During the First World War Cosmo Hamilton was a lieutenant in the Royal Naval Air Service. He gave lectures on his aerial exploits.

St. Joseph's Hospital Staff Association holds 25th anniversary banquet

The annual banquet of **St. Joseph's Hospital** Staff Association was held February 13, 1917, at the University Club. **Dr. William F. Flanagan** acted as toastmaster. The speaker of the evening was **Dr. W. Louis Chapman**. Dr. Chapman gave a humorous sketch of the feelings of after-dinner speakers and a serious appeal to the medical profession to offer their services to their country in case of an impending need.

Monsignor Peter Blessing re-viewed briefly the work and growth of the hospital, which is this year celebrating the twenty-fifth anniversary of its founding.

"WESTMINSTER STREET SHOWING TURKS HEAD BLDG., PROVIDENCE, R.I." PC6762, RHODE ISLAND POSTCARD COLLECTION, PROVIDENCE PUBLIC LIBRARY, PROVIDENCE, RI.

The Turks Head Building in downtown Providence was the site of frequent meetings of medical organizations in the 1900s. This vintage postcard shows what the building looked like when the Rhode Island Hospital Club met there in 1917.

MEDICAL CLUBS.

MEDICAL RESEARCH CLUB, FEBRUARY 14, 1917.

OCULAR MANIFESTATIONS OF CARDIO-VASCULAR DISEASE.

Attention was directed to the increase in cardiovascular diseases as causes of death and the importance of early diagnosis. Ocular signs are not necessarily early signs, but often they are predominant and are the means of calling attention to the graver systemic disturbance of which they are but an index.

Early ocular subjective signs noted are slight dimness of vision, disproportionate asthenopia, metamorphopsia shown by irregularity of one or two letters in a word due to a partial central scotoma, and transient amblyopia of a few seconds to minutes due to spasmodic closure of retinal arteries.

The ophthalmoscope reveals as early objective signs indentation of veins and ampulliform dilatation of the distal portion of the veins at the arterio-venous crossings, increased tortuosity of the finer arterial branches about the macula, nervehead congestion and a general filminess of the fundus.

J. W. L.

Miscellaneous

DR. PAUL APPLETON has opened an office at 6 Thomas Street.

DR. M.J. O'NEIL has removed his office from 665 Broad Street to 399 Prairie Avenue.

DR. GEORGE A. MATTESON has recently returned from hospital duty with the Harvard Surgical Unit in France, and has removed his office to 106 Waterman Street.

DR. FRANK T. FULTON has recently returned from an extended trip to Baltimore and Atlantic City.

Necrology

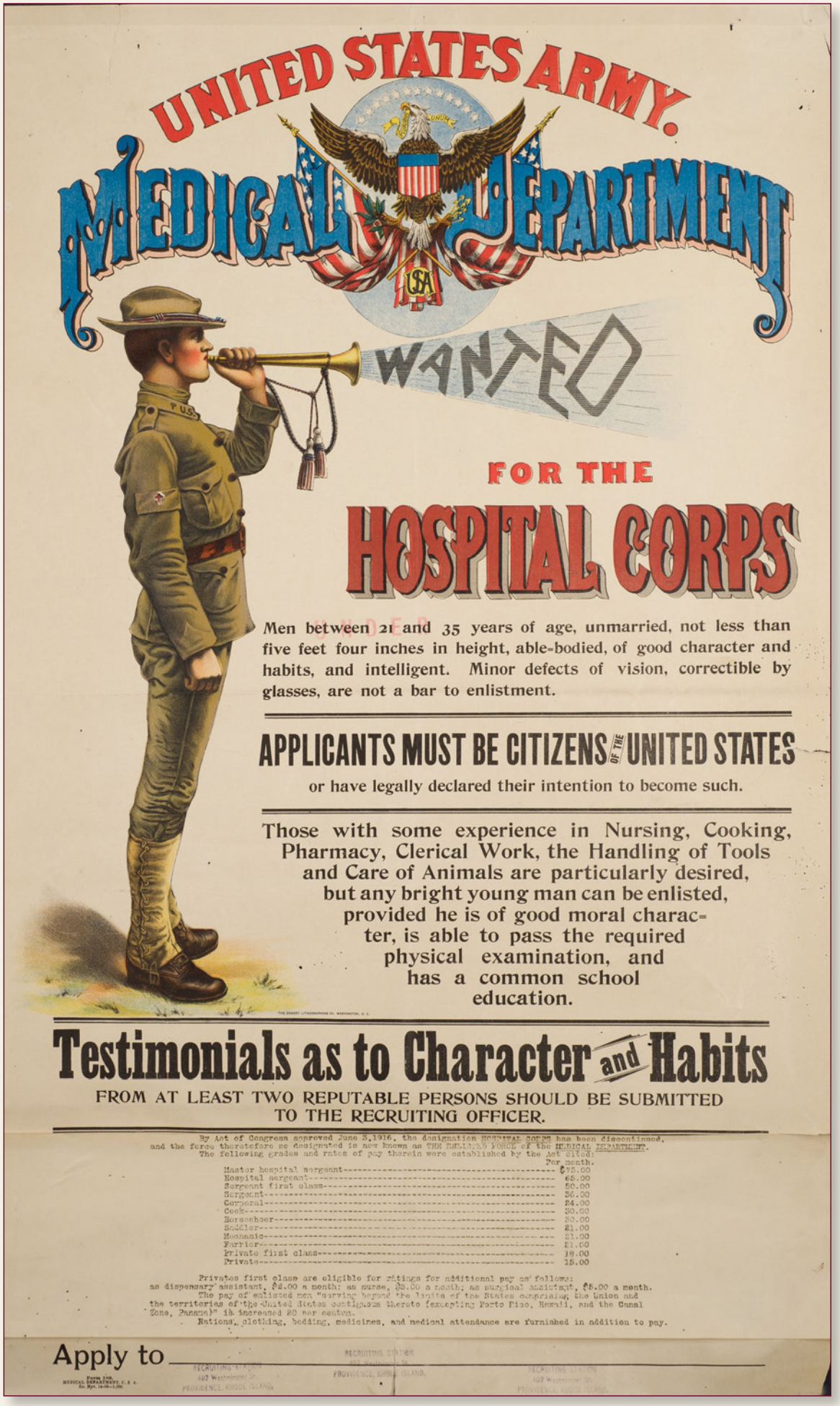
DR. EDWARD STARK PARKER, 42, died at his home in Pawtucket after a short illness on Feb. 18, 1917. He was born in Derby Line, Vt., May 23, 1874.

In 1896, he received the degree of B.A. and his medical degree from Harvard in 1900. He married Miss Agnes Wightman of Pawtucket in 1903.

Dr. Parker joined the Rhode Island Medical Society in 1904.

This poster appeared in the U.S. Army recruiting station in Providence in 1917.

There is a pasted-on paper banner at the bottom, which states that as of June 3, 1916 the Hospital Corps is discontinued and replaced with the "Enlisted Force of the Medical Department" and the text below lists the job categories and pay per month.



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