

Yellow Jack as It Is Known to Modern Science

THE recent outbreak of yellow fever in New Orleans, although it has not at any time assumed the character of an epidemic, as is the case on the Isthmus of Panama, has been sufficiently malignant in its results to cause the greatest apprehension and to stimulate an earnest and most vigorous effort for

savory reputation for unhealthfulness and as a preliminary Surgeon General Sternberg (now retired) appointed a board to investigate the yellow fever. The preliminary observation disclosed several significant facts. It was found that nonimmune persons did not often contract the disease. That seemed to controvert the idea of contagion and infection. Repeated examinations of the blood and excreta of patients showed no signs of the press-

Two experiment houses were built at Quemado, Cuba, one of them called the "infected mosquito building" and the other the "infected clothing building." The former was screened and well ventilated; the other was screened and unventilated. In the former, patients were bitten by infected mosquitoes; in the latter, no mosquitoes were admitted, but the persons submitting themselves to the experiment slept with soiled bedding and clothing di-

lently on the west coast of Africa, in the countries bordering on the Mediterranean and on India. Of course its wide distribution at the time it was first classified as a distinct disease would not militate against the theory of its American origin, but it is also an undeniable fact that outbreaks of the disorder occurred in the lagoons of Africa long before the discovery of the American continent.

It is a well authenticated fact that yellow fever has prevailed endemically throughout the West Indies and in certain regions on the Spanish main ever since the discovery of America. Barbados, Jamaica and Cuba suffered epidemics before the middle of the seventeenth century. There were outbreaks of the pest in Philadelphia, Boston and Charleston as early as 1692, and for a hundred years afterward there were occasional eruptions, culminating in the famous Philadelphia epidemic of 1793. Most northern cities were able by extraordinary sanitary and quarantine measures to prevent

the spread of the pestilence, but it frequently recurred after the arrival of a shipload of African slaves and its appearance in tropical Europe may be referred to the same cause. Its earliest recorded appearance as a pestilence on the continent of Europe was in the Spanish ports of the Mediterranean whence it spread to the cities of the Levant along the Red sea and finally to India. In the latter country it found congenial surroundings and obtained a foothold that it still well established in the crowded Hindoo cities.

In the seventeenth century the slave trade was regarded as a perfectly legitimate business, followed by the shipper which was in the hold being pumped into the stagnant pool in which the vessel was lying. Three days later several carpenters employed in the ship's outfit were taken violently ill, soon all round nearly every sailor on the ship and most of those who resided in the shipyard near by were prostrated by a complaint which was recognized by competent physicians as identical with the fever prevalent on shore ships. Within a week the pestilence was epidemic in the city. Philadelphia's prominence as a port led to several subsequent sequels of the pest, and in every case it seemed to originate either from a slave ship or from a vessel coming direct from a southern port.

In 1762 several thousand persons died during an epidemic of yellow fever in the Quaker City, and there were subsequent destructive visitations in 1793, 1797 and 1802.

The great plague of 1793 really began in New York and spread over most of the United States during that and the following season.

The worst experience Southern Europe ever had with the pest began at Gibraltar in 1805.

A slave ship with the disease on board was encountered by a British man-of-war which sent off the Gibraltar straits and as there were not enough well men on board to man the ship the captain of the English vessel sent several sailors aboard the slave and advised the master to put in at Gibraltar. The latter did so. The slaves were landed, the ship was cleaned, and a few days later the fever was in full blast among the soldiers of the garrison. Over a thousand soldiers died of the complaint and three quarters of the sailors. Many fled, and the contagion was spread among the Spanish ports of the Mediterranean. In the following summer it made its appearance at Genoa, and a few weeks later at Naples, where over 5,000 fatal cases occurred. Thence it madly made its way along the Italian and French coasts to Constantinople, where it found congenital rods. The ports of the empire were well stricken in turn, and the contagion followed the pilgrim route down the Red sea to Mecca. Returning pilgrims took it with them to India, into the great epidemic followed.

During the past century the visits of the dreaded disease to the United States were numerous. New Orleans was born the chief sufferer. Epidemics of yellow fever prevailed there in 1805, 1822, 1830, 1838, 1847, 1851 and 1859.

The visitation of 1855 was the most deadly, over 3,000 victims having fallen. The experience of Memphis in 1832 and 1833 is still recalled with horror.

During the first portion of the pest there were 5,000 deaths, and during the second, although the town was almost deserted, there were several hundred more. The visitation of 1878 was the most destructive of any ever experienced in the United States, 65,956 cases having been reported and 10,000 deaths.

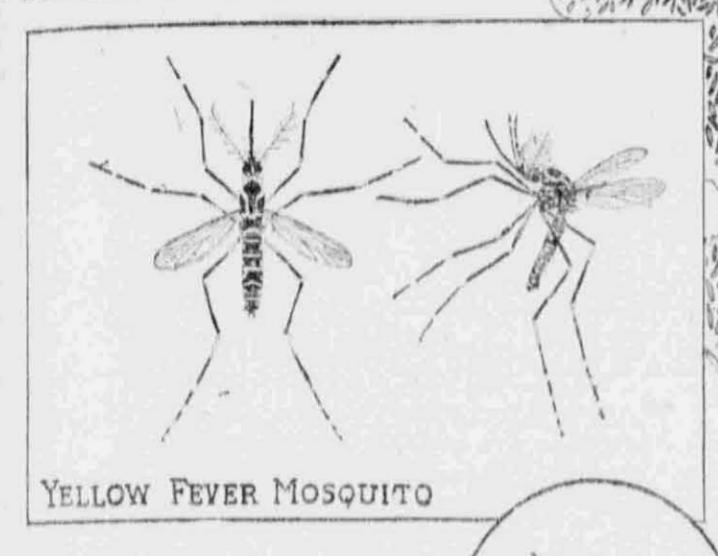
During the civil war there was scarcely a case among the Union troops in the south, although it was freely predicted that the forces in the Gulf region would be annihilated by the disease.

When New Orleans was occupied by General Butler many regiments received the description of his army as practically exterminated. He began immediately to put the city in a good sanitary condition, closing yards of his men to clean the streets and sewers. As a result there was not a single case of well developed yellow fever in New Orleans during the Union occupation.

— EVERETT LAWTON.



A YELLOW FEVER WARD



YELLOW FEVER MOSQUITO

Its suppression. With the history of past visitations of the scourge in mind, the citizens of the regions most exposed to its ravages have been prompt in their measures of resistance. Fortunately the combat against this most abominable of summer visitors is no longer the unequal struggle it once proved to be. Modern research and improved methods of sanitation have robbed the ancient terror of much of its graweness, but too much that is reminiscent of its horrors still remains.

Medical men have never left off theorizing about the cause of yellow fever since they began to treat it. It was believed by many that it was infectious, a specific poison carried in the air. Others taught that it was contagious, contracted only by actual contact with substances which had been contaminated by a fever patient. After the search for micro-organisms became the fact there were many announcements of the discovery of the fever bearing, but consecutive physicians were inclined to be skeptical. The summer of 1890 came the first fitting of this type solution. The United States government then undertook the test which gave become famous.

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ence of bacteria. That disposed of the microbe theory. Ten years earlier a Cuban physician, Dr. Carlos Finlay of Havana, had propounded the theory that the fever could be carried by a mosquito, the culicoid (now Aedes) fasciatus. The board began to experiment with this belief. Cuban persons were permitted to be bitten by those contaminated mosquitoes. From nine there was no result, two had yellow fever. This proved conclusively that the disease could be communicated in that way.

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From the yellow fever hospitals in thirteen cases where nonimmunes were bitten by mosquitoes which had bitten a fever patient ten contracted the disease. In the other house, although an equal number had slept there several nights, no one became ill.

This discovery, which has since been accepted by medical authorities, especially those of foreign countries, to describe yellow fever as a disease which originated on the western continent, has been excellent ground for dissent. It is well known to medical historians that at the time when the plague first appeared in the West Indies and at various points in South and Central America a similar disease rage vio-

lent epidemics, at least after the beginning of the nineteenth century. In the disease crept in from the West Indies now and then and raged epidemically in the southern towns.

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