

It is apparent that the source of infection, the patient, is quite under our control in most instances. Of course the possibility always exists of mild ambulatory cases that may escape our observation. I have always thought that such cases, specially among the negroes, are responsible for the spread of some epidemics.

If the patient has had the opportunity to infect mosquitoes before he comes under observation, it becomes necessary to destroy the infected insects. Here, again, we observe how completely this disease is under our control. The insects give us time to act. They can do no harm before the lapse of twelve days. Furthermore the *Stegomyia* mosquito is a domestic insect. It is not likely to migrate far from the patient. It will remain in the same room or at least in the same house. If the patient's quarters are protected against the smoke, the other parts of the building may be fumigated with pyrethrum. The houses immediately adjoining should be fumigated at the same time. After the recovery or death of the patient the room occupied by him should also be fumigated.

Although the pyrethrum is not so certain an insecticide as are certain other substances, it is more manageable, and can be applied in all places and at all times. If care be taken, during fumigation, to leave a sheet of paper, wet with mucilage, under a glass window, or under some opening pasted over with paper, the insects are sure to fly to the light, and will drop, when paralyzed, upon the paper beneath. In this manner, and by carefully sweeping the room, before freely opening the windows, after fumigating for four hours, we are quite sure of collecting all the mosquitoes. These should be burnt at once, or placed in a bottle, if we desire to determine the kind of insects found in the premises.

The complete success attained in Havana by these methods was in part due to the fact that most of the patients affected with yellow fever were hospital patients; that is, they could be removed at once to Las Animas, or to some of the private hospitals in which the sanitary department had seen to the preparation of adequate wards.

A fine was imposed on the physician who failed to report a case of yellow fever, and a commission of experts,

whose opinion as to the diagnosis was final, visited the patient at once, and reported upon the nature of the disease. Preventive measures already instituted were continued or not according to the finding of the commission.

At the same time that these direct measures of prophylaxis are being carried out, every effort should be made to diminish the number of the *Stegomyia* mosquitoes in the locality. Deposits of water of all kinds should be reduced to a minimum. Waste waters, sinks, and pools should be frequently oiled with petroleum, and water barrels, tanks, and cisterns should be screened.

The above simple method of prophylaxis is based on the well-known studies of Dr. Finlay, and Drs. Reed, Carroll, Lazear, and Agramonte. These authors had left undetermined the duration of the period of infectivity of cases of yellow fever. From their experience and my own it appeared probable that this period of infectivity was limited to the first three days of the disease. In the report of the French commission (Marchoux, Salimbeni, Simond) sent to Rio by the Pasteur Institute, we find (*Annales de l'Institut Pasteur*, November, 1903) that special attention was paid to this point, and that inoculation experiments were made to show that a case of yellow fever on the fourth day was not capable of transmitting the disease.

Other experiments of the said commission are of interest from the point of view of individual prophylaxis, although I do not believe that they are capable of extensive practical application. Our system of general prophylaxis is so complete, the results are so certain, that we can scarcely believe that methods of individual prophylaxis will ever be called for.

The experimenters of the French commission have immunized individuals by injecting serum of yellow-fever patients previously treated by heating for five minutes at a temperature of 55° C., or by keeping it under a layer of vaseline during eight days. Dr. Carroll had already suggested the attenuation of the virus by heat. The commission also show that the serum of convalescents possesses preventive properties, and perhaps curative properties, as suggested by Finlay.

Juan Guiteras.

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