

MULBERRY SICKNESS

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At the time of the year when the mulberry tree (*Morus nigra*) is in fruit, the attention of physicians should be directed to the distressing sickness which occurs in young children who have eaten the whole fruit. This fruit, a composite berry, is the product of unisexual flowers which blossom in catkin inflorescences about the central stalk. The mulberry tree is cultivated mainly for its purplish-black fruit which is not, usually, eaten fresh, but is turned into excellent preserves and is also the source of a pleasant drink. Nevertheless, the mulberry has been used over a long time as a food for domestic animals.

Because of its botanical structure, i.e. a multiple minute fruit massed about a central stalk running the whole length of the berry, younger children and older infants who eat the fruit, crush it within their mouths and swallow the inner stalk with the fruit. Should the external part of the stalk be nipped off close to the mulberry, the internal stalk remains in a well-matured fruit, and can be as long as 1 inch (2.5 cm.). It is this internal stalk which provokes what I have named mulberry sickness. If there is juice enough and the taste is pleasant enough to tempt the child to eat the fruit, then he is likely to fall sick. Three instances of this sickness occurring in my practice last year and another this year have led me to realize how little is known about this complaint in our profession.

In the local medical library I have not been able to uncover a relevant reference to mulberry sickness and so, perhaps, some information will not be out of place here.

SYMPTOMATOLOGY

Acute nausea, followed quickly by vomiting, sets in about 2-4 hours after the mulberries are eaten. There is no diarrhoea, no pain and no raised temperature, but in a formerly robust, rather young child a malaise and lethargy persists between the episodes of vomiting. The child may be old enough to volunteer that a headache is present. There may be anorexia before the nausea and vomiting appear and this is inexplicable without further enquiry. The younger the child the worse the symptoms. The age of susceptibility varies from that of the toddler to close on 4 years.

The vomiting, which may be projectile on occasion, tends to recur intermittently over as long as 4 days in the toddler who has had little or no treatment, and this consequently produces a profound electrolyte disturbance of the child's metabolism. However, when treatment for the vomiting is begun forthwith, the sickness is easily controlled. Over the age of 4 years the illness does not seem to occur.

COMMENT

If the first vomitus following the ingestion of the mulberries is seen by a responsible person, the cause of the sickness becomes obvious because, although up to 4 hours may have passed since the time they were eaten, the tell-tale chewed mulberries re-appear in the stomach contents. The number of mulberries eaten may be assessed by counting the undigested green stalks. If the parent or the physician is aware of the significance of these mulberry stalks, the sickness loses much of its alarming quality.

It has happened, however, that the child has eaten the fruit without the parent's knowledge, and later vomited the evidence, which has gone unwitnessed. The child continues to retch and vomit and the cause for its wretched state remains a matter for conjecture. The sickness, apparently, is not determined by the number of mulberries eaten, for as few as 4 which had been given to a 3½-year-old child precipitated the vomiting. There is little, if any, doubt that some kind of irritation of the inner lining of the stomach wall by these indigestible central mulberry stalks causes the sickness, and not any poisonous or toxic substance derived from these stalks.

In essentially residential townships like the so-called 'garden cities' the mulberry tree is grown for its decorative appeal and also, in some homes, to provide a fresh daily supply of mulberry leaves for children who are interested in the rearing of silkworms; the tree grows quickly in sheltered spots. One mother with whom I talked about this sickness and who has a mulberry tree in her garden can recall her mother warning her as a young child not to eat the mulberry because it would make her sick. Each spring and summer she finds herself warning off young invaders of her garden who are intent upon eating her mulberries. Once she used the misnomer 'groen-takkie-siekte' which is an indication that the cause of this sickness is known to some people; perhaps a better vernacular expression would be 'moerbeistingsiekte' if not simply 'moerbeisiekte'.

SUMMARY

A brief description is given of an acute sickness, mainly characterized by vomiting, occurring in infants and young children who have eaten the whole fruit of the mulberry tree. The cause of this sickness and its recognition are commented upon.