

VAN DIE REDAKSIE : EDITORIAL

GENEESKUNDIGE ALMANAK : APRIL

April was die tweede maand van die Romeinse Kalender. Die naam is waarskynlik afgelei van *aperire* = om oop te maak. Die aanvang van die noordelike lente in hierdie maand maak *aperire* 'n gepaste beskrywing vir die ontluikende struik en blomme. Op 4 April het die ou Romeine spele gehad ter ere van Cybele (Ludi Megalensis).

27 April 1807. Belangrike wetgewing dui die ontluiking van die Geneeskunde as 'n Suid-Afrikaanse professionele groep aan toe die Hoër Mediese Komitee (Supreme Medical Committee) as 'n eksaminerende en lisensiërende liggaam gestig is om kwaksalwery te bekamp.

Die Ludi Megalensis vestig ook ons aandag op die verantwoordelikheid van die geneesheer in sport, in welke verband sy funksie by boksbeserings onlangs in dié kolomme bespreek is [S. Afr. T. Geneesk. (1964): 38, 879].

Die oudste hedendaagse hospitaalgebou in Suid-Afrika, die Grey-hospitaal, Pietermaritzburg, is in 1855 geopen en ontvang snydende kritiek uit die pen van dr. Gowers in April 1862 weens sy personeeltekort:

'Like lawyers wanting in effrontery,
Or soldiers sent to battle weaponless,
Or shopkeepers whose shelves are short of goods,
Or clerks without a pen behind each ear,
Or poets at a loss for images
Such is the surgeon of Grey's Hospital.'

1 April 1578. William Harvey is gebore te Folkestone, Engeland. Word die beskrywer van die beweging van die hart en bloed in sy tans bekende *De motu cordis*. Sy metode bewys ook vir sy tyd die belang van eksperimentele ondersoek. Sedert 1778 word die Harvey gedenklesings jaarliks in April in Edinburgh gehou. Andrew Duncan lewer die eerste. Moderne kardiologie as wetenskap dateer waarskynlik vanaf hierdie datum.

2 April 1669. Jacob Benignus Winslow is gebore te Odense, Denemarke. Hy word deur studente in anatomie onthou vir sy beskrywing van die foramen van Winslow. Word ook genoem die vader van die beskrywende anatomie en sy teksboek is uit Frans in Engels vertaal as: *An Anatomical Exposition of the Structure of the Human Body*.

5 April 1827. Joseph Lister se geboortedag. Sy begrip van aseptiese chirurgie is gebaseer op die 'kiemteorie' van Pasteur en soos die geval met alle beginsels is, het hierdie een ontelbare uitvloeisels in bakteriologie en chirurgiese tegniek tot gevolg gehad. Moderne chirurgie sonder Lister se aanvoerwerk is ondenkbaar.

5 April 1866. Thomas Hodgkin, beskrywer van die siekte met sy naam, is aan disenterie oorlede.

8 April 1850. William Henry Welch is op hierdie dag gebore. In 1892 beskryf hy die basil van gasgangreen, ook bekend as *Cl. welchii*. Hy word professor aan die Bellevue Mediese Skool (1879-1884) en van 1884-1916 word hy professor van patologie te Johns Hopkins, Baltimore. Hy bedank in 1916 om Direkteur van die 'School of Hygiene and Public Health', Baltimore te word. Op 76-

jarige leeftyd is hy aangestel as professor in die Geskiedenis van Geneeskunde, Johns Hopkins.

April 1795. Thomas Addison is in hierdie maand gebore. Hy beklee 'n unieke plek in geskiedenis as beskrywer van twee siektes, nl. Addison se siekte (byniertekort) en Addison se anemie (perniseuse anemie). Hy het bevestig dat 'while investigating his anaemia he stumbled upon his disease' (sien annotasie by 15 Maart in die Geneeskundige Almanak vir Maart').

8 April 1869. Harvey William Cushing, die jongste van 10 kinders, is gebore. Sedert 1899 is die middelnaam uit sy korrespondensie gelos. Neurochirurgie het sy ontstaan as spesialiteitsvak grotendeels aan Cushing te danke, maar hy is miskien beter bekend vanweë Cushing se siekte wat hy beskryf het in 'n pasiënt met 'n tumor van die hipofiese. Sy belangrikste bydraes tot neurochirurgie dateer uit die tydperk 1895-1907 terwyl sy studies op die hipofiese veral van 1908 tot 1912 strek.

11 April 1916. Harald Hirschsprung is oorlede. Beskrywer van Hirschsprung se siekte in 1887.

April 1835. John Hughlings Jackson is in hierdie maand gebore te Green Hammerton, Yorkshire, Engeland. 'n Bell se verlamming stimuleer hom tot die studie van neurologie waardeur hy sy groot bydraes tot epilepsie maak. Jackson se epilepsie dra sy naam. Hy word beskryf as eksentriek, stil en waardig. Hy is in 1911 aan pneumonie oorlede.

20 April 1831. Luigi Rolando is oorlede aan karsinoom van die pilorus. Sy naam is gekoppel aan die fissuur van Rolando.

24 April 1964. Gerhard Domagk is oorlede. Hy was direkteur van Farbenfabriken Bayer A.G. waar hy aan die hoof van hulle eksperimentele afdeling in patologie en bakteriologie gestaan het. Hy het die eerste sulfonamied ontwikkel en op die mark gebring as Prontosil. Hy het in die voetspore van Ehrlich gevolg (sien Geneeskundige Almanak vir Maart) en die beginsel van chemoterapie prakties uitvoerbaar gemaak. Wen die Nobelprys in 1939.

25 April 1853. Herman Welcher voer die eerste witseltelling uit op Margaretha Mueller en dit kom op 12,133 per kubieke millimeter te staan. Hierdie tegniek, 'n paar jaar vroeër deur Vierordt op rooi selle gebruik, word beskou as die grootste ontwikkeling op die gebied van kwantitatiewe metodes in biologie.

28 April 1842. Sir Charles Bell is oorlede. Hy het in 1821 Bell se verlamming beskryf. Sy belangrikste bydrae word gelykgestel aan dié van William Harvey en word ook genoem 'die grootste fisiologiese ontdekking in Engeland sedert Harvey se tyd'. Dit is die ontdekking van die onderskeie sensoriese en motoriese funksies van senuwees.

30 April 1934. William Henry Welch is oorlede (sien bo). Hy het die biblioteek van historiese geneeskundige dokumente te Johns Hopkins gestig (die W.H. Welch Biblioteek) en is op 80-jarige ouderdom as die 'Dekaan van Amerikaanse Geneeskunde' bestempel deur president Hoover.

Ook in April in 1843 word in die nietige en kortlewende

tydskrif, *New England Quarterly Journal of Medicine* 'n artikel deur Oliver Wendell Holmes gepubliseer 'The contagiousness of puerperal fever'. Deur hierdie bydrae het

hy dus vir Semmelweis voorgespring om die oorsake van kraamkoors aan te dui.

1. Van die Redaksie (1965): *S. Afr. T. Geneesk.*, 39, 242.

THE MEDICAL CONGRESS AT PORT ELIZABETH

The 45th South African Medical Congress of the Medical Association of South Africa will be held in Port Elizabeth from 27 June to 3 July 1965. The Congress represents the continuation of an old and proud tradition, and it is sincerely hoped that this Congress will be as successful as well attended as previous congresses.

The scientific programme is not quite ready for publication; the information in this regard will however be published as soon as possible. Arrangements have already been made for a number of distinguished visitors to attend the Congress. Among those who are expected are: Dr. Leonard Kurland of the Mayo Clinic, Minnesota, who is Director of Biometry and Medical Statistics; Dr. G. Lloyd-Roberts, orthopaedic surgeon, from the Hospital for Sick Children, London; Mr. W. G. Fegan, surgeon from Sir Patrick Dun's Hospital, Dublin; Dr. James Parkhouse of the Radcliffe Infirmary, Oxford; Professor W. Struben, E.N.T. authority from Rotterdam, Holland; Dr. John Fry, general practitioner, London; Dr. Stephen Steen, anaesthetist, New York; Sir Charles Illingworth, Professor of Surgery, Glasgow; Dr. G. Swyer, physician, London; Dr. Peter Samman, dermatologist, London; Dr. Valentine Logue, neurosurgeon, London; Dr. T. L. T. Lewis, gynaecologist, London and Dr. E. Mears, general practitioner, London.

The Cape Midland Branch, who will act as hosts to the Congress, are continuing their work of preparation in the reasonable expectation that members of the Association will do their share in an attempt to ensure the successful culmination of this important event.

Since the early days of its existence it has been the explicit aim of the Medical Association to function as a scientific and cultural body of professional men who are fully aware of the great and important obligation

to remain abreast of the times in professional and scientific as well as cultural matters. Consequently, meetings of the individual members, Divisions, Branches, Groups, and the organization of general congresses at regular intervals, have always constituted an important part of the activities of the Association.

There is, however, yet another reason why the scientific and academic activities of the Association have always been regarded as eminently important—the need for sustained postgraduate contact between doctors on an academic and scientific level. This need is felt by doctors throughout the world, since all doctors are becoming increasingly aware of the rapid and extensive development of medical knowledge and of the significance of this development.

The problem of keeping in touch with modern advances can be solved in various ways: by reading, by doing research work, by travelling, and by communicating with colleagues at congresses. Research work in South Africa should be encouraged at all costs, but it presents many difficulties, of which the economic problem and the relative isolation of doctors and communities in this country with its vast expanses are probably the most important. Overseas travel is a luxury that many cannot afford. Reading fills this need for most medical men and yet reading alone is not sufficient. The stimulus gained from exchange of views is essential.

In order to make this kind of social and intellectual communication possible, the Medical Association has been organizing its biennial Congresses over the years. Through the medium of the *Journal* and on behalf of the Cape Midland Branch we should like to extend a hearty invitation to as many of our members as possible to cooperate in order to make this Congress a success.

NEUROLOGICAL COMPLICATIONS OF SMALLPOX VACCINATION

Vaccination against smallpox is a compulsory public health measure in this and most other countries. The fact that many patients show quite violent reactions to Jennerian vaccination is well known, as is the possibility of aggravating and further sensitizing eczematous individuals. However, there has been considerable uncertainty surrounding the problem of post-vaccinal encephalomyelitis and encephalopathy.

It was reported¹ that 39 of 800,000 people vaccinated in South Wales during the 1962 epidemic of smallpox exhibited acute neurological illness 3 weeks after successful vaccination—24 patients had received primary vaccinations and 15 had been revaccinated. The following observations were made:

Post-vaccinal encephalomyelitis is unknown in infants under 2 years of age; the incubation period is 8-15 days; the onset is acute and there is always some degree of loss of consciousness. Mutism, dysarthria and involuntary movements are common, and the spinal cord may be involved. The CSF usually shows lymphocytic reaction with in-

creased protein. The ECG shows generalized, high voltage, slow waves from both hemispheres. The pathology is one of perivenous microglial proliferation and demyelination. Recovery is complete if the patient survives, except where the spinal cord has been involved.

An attack is usually followed by amnesia. Steroid treatment was used in 8 patients, but no definite conclusion could be drawn regarding its usefulness.

Post-vaccinal encephalopathy usually occurs in infants under 2 years of age and has a different clinical picture. Hemiplegia and aphasia are common sequelae, but spinal cord involvement is very rare. The CSF is often normal. Recovery is often incomplete; residual cerebral impairment and hemiplegia frequently follow.

The authors feel that more extensive and precise information should be accumulated to promote a better understanding of these disorders, which in turn might throw more light on the causation of spontaneous diseases such as multiple sclerosis and acute disseminated encephalomyelitis.

1. Spillane, J. D. and Wells, C. E. C. (1964): *Brain*, 87, 1.