

Correspondence.

THE CURE OF SLEEPING SICKNESS.

SIR,—With reference to the editorial notice on the treatment of sleeping sickness in your issue of November 5th (p. 759), I should like to correct a misapprehension in the last paragraph under which apparently Professor Warrington Yorke laboured when he published his recent critical review in a medium which precluded the possibility of a reply.

The expressed object of the mission, as endorsed by the Colonial Office, is to test out and compare various methods of treatment already in vogue or which may be put forward in the near future (the new German preparation, "Bayer 205," having been specified), and, further, to place the Commission under the general direction of an independent scientist.

As clinical and laboratory experience is a necessity the association has approached Professor J. W. H. Eyre of Guy's Hospital, who was in 1906 chairman of the working party of the Malta Fever Committee, and he has signified his willingness to accept the post of director.

With reference to Professor Warrington Yorke's criticism as to absence of controls, I would point out that the work done by Marshall and Vassallo has been performed by them as Uganda medical officers in the field and in their spare time, without the great advantage of having their patients constantly in hospital and completely under their control, so that they have been unable to carry out all the controls and examinations which would have been possible in a well equipped laboratory attached to a hospital in England. Further, they have carried out a method of treatment which they have found highly successful in practice, and have offered several theories to explain these results.

Taking their actual results as compared with other methods of treatment, the Tropical Disease Prevention Association expects to receive early in 1922 a report embodying all the results of treatment up to that date, and from the partial data already to hand there appears every prospect of these figures completely justifying the claim that this serum method is giving better results than any other in use up to the present, especially when cases of trypanosomiasis from the same countries are compared.

The opinion, based on a clinical observation, that "although the administration of one dose of salvarsan, neo-salvarsan, or atoxyl is sufficient to sterilize the blood stream, symptoms reappear within a variable period, averaging about four months, and the disease progresses to a fatal termination," comes in for adverse criticism, although in the main it corresponds with the results revealed by an analysis of the figures put forward by Professor Yorke, and certainly agrees with the results of animal experiments detailed by Colonel Wenyon in his article (in the same issue of the BRITISH MEDICAL JOURNAL) wherein he states "in experimentally inoculated small animals, such as mice, it is usually possible by means of a single dose of a drug to bring about the disappearance of trypanosomes from the peripheral blood, but almost invariably relapses occur in a comparatively short time and the animals die of the infection."

Finally, the Tropical Disease Prevention Association is not prejudiced in favour of any one method of treatment, but it does consider that fair play should be given to any method which has shown promise of success. This attitude is not conspicuous in Professor Yorke's review.

On the other hand, far from condemning the value of "Bayer 205," in spite of the fact that to the best of its knowledge this secret remedy has been used only on one human patient, the association is, the more readily after Colonel Wenyon's experiments, prepared to investigate its importance. A German expedition, under the auspices of our Colonial Office, is now on its way to Rhodesia to test this treatment with the aid of our medical officers in the colony. The expedition, which I am assured by the Colonial Office is disinterested, is entirely financed by German commercial firms who, in view of the present value of the mark and the non-existence of German colonial interests, may or may not be disinterested also. Further, I am informed that the composition of "Bayer 205" will be revealed later. Past experience of German descriptions of the method of manufacture of "606" leads

one to anticipate that this revelation may not enable others to reproduce the remedy in question.

It is, perhaps, not fully recognized by tropical experts working at home that treatment of such a disease as sleeping sickness must be administratively and economically practicable on a large scale, as well as scientifically effective in a hospital at home. It cannot be stated too emphatically that the object of the association is to try serum and other methods in the field in order to gauge their respective values for stamping out sleeping sickness.—I am, etc.,

E. T. JENSEN,
Honorary Secretary, Tropical Disease Prevention
Association.
London W., Nov. 7th.

A METHOD OF SKIN-GRAFTING.

SIR,—We feel that we cannot allow Dr. Samuel Samuel's short paper on this subject in your issue of October 22nd to pass without comment.

For many years now skin-grafting in various regions of the body has formed an important part of our work in plastic surgery; many thousands of patients have passed through our hands, and in a very large percentage of these skin-grafting has been carried out at some stage or other of their treatment. The procedure has, therefore, become an every-day one in our work and has been placed upon a sound and rational footing.

Esser in 1917 described, in the *Annals of Surgery*, a pressure method which he had used in connexion with ectropion conditions; it is upon this, considerably modified and extended in its field of usefulness, that our present method is based. An accurate mould of the area to be grafted is taken in dental composition; the Thiersch graft is placed upon this with its raw surface outermost; more than one graft may be used; the whole is then pressed into and fixed in position by any convenient means available.

We do not propose to go at further length into a description of technique, for details of which readers are referred to Esser's article quoted above, *Plastic Surgery of the Face* (Gillies), and "Skin grafting of the buccal cavity" (*British Journal of Surgery*, vol. ix, No. 33; Kilner and Jackson).

In regard to results, a "success" is one in which the raw area to be grafted is completely covered with epithelium from the time of operation and which never subsequently shows any denuded patches. Taking this as a standard of success the above method has given us well over 90 per cent. with Thiersch and over 60 per cent. with Wolfe grafts. This high percentage is, in our opinion, due to the principle of pressure dressing.

Dr. Samuel speaks of "the application of the method of lymphangioplasty combined with that of anchored dressings" and makes much of the "feeds." Not one of the thousands of skin grafts we have performed has received any such lymphangioplastic feeding, and we therefore consider that Dr. Samuel is entirely wrong in attributing even part of his increased success to this ingenious procedure. His method of anchoring dressings suggests that he has unwittingly stumbled upon what is, to our mind, an indifferent way of obtaining "pressure dressing," and it is to this that any increase in the number of his successful grafts is due.

Might we remind surgeons that they are always welcome to see this work at Sidcup?—We are, etc.,

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T. P. KILNER, H. B. RUSSELL,
Surgeons to the Queen's Hospital, Sidcup.

Sidcup, Nov. 3rd.

THE ETIOLOGY AND TREATMENT OF VARICOSE ULCERS.

SIR,—I am much interested in the very instructive paper on the above subject in your issue of October 29th by Drs. Grove and Vines, as it reminds me of some experiments I carried out in hospital many years ago. Varicose ulcers can scarcely be called a medical subject, except on the principle that those cases which do not pay are medical and those which do are surgical. However, as my surgical colleagues refused to admit stinking ulcers into their wards, I had no difficulty in appropriating as many cases as I wanted. Varicose ulcers usually occur among the poor, and I found a considerable number of cases among cooks, whose