

Scarlet Fever and Its Spread and Control

Scarlet fever, scarlatina, scarlet rash, is an acute contagious disease, of serious consequences that attacks people of all ages and in all walks of life. It is commonly regarded as one of the diseases of childhood. Unfortunately the majority of its victims are children between the ages of two and ten years—ninety per cent of the deaths from scarlet fever occur between these ages, and it is most necessary to use every precaution to prevent children from contracting the disease. And if one should be so unfortunate it is necessary to give the most care and attention to the patient in order that complete recovery may be made. A mild case is probably more serious than a severe one, because of the probability of the disease being spread, and because of the probability of the mild case not receiving the careful attention necessary to prevent the occurrence of some serious complications. The great majority of the deaths attributed to the disease are the result of complications.

Scarlet fever is not common in hot climates nor during the summer months. The disease increases in the fall and continues high until May, when it decreases.

Onset. Scarlet fever begins with a temperature that may be slight or may be very high. There is usually some pain in the head and the aching that occurs with any temperature; nausea and vomiting may occur; the throat is usually sore, red and inflamed. During the first two or three days there occurs an eruption or scarlet rash from which the disease gets its name. The intensity of the rash usually depends upon the severity of the disease. In mild cases the rash may be so slight as to escape notice or it may be rather severe. The temperature and other symptoms may last from a few hours only in the very mild cases to seven or eight weeks in the severe cases. When the rash has been prominent, desquamation, or peeling, or scaling of the skin will occur. This scaling may be so fine in the mild cases that it will hardly be detected, and in the more severe cases the palms of the hands and soles of the feet will fall off in large scales.

How Contagious. The exact cause, or the specific bacteria that causes the disease is not known. The virus that causes the disease is contained in the secretions or discharges from the nose, throat, mouth, ears, or any other sore on the body. The virus is also contained in the blood of the patient. The disease is contracted by the virus entering the mouth and nose.

The contagiousness depends upon the condition of the mucous membranes of the nose and throat. Inflammation of the membranes, as in the case of a cold, makes us more susceptible.

The disease is contagious from the beginning. It is probably the most contagious disease known. It may remain contagious during the fever and long after the fever has subsided, until all discharges from the nose, throat, ears, and open sores have ceased.

It was at one time supposed that the germs were contagious and that during the stage of peeling was the most contagious period. We now know that this is not correct. However the scales might become soiled or contaminated with the discharges from the body, and thereby rendered infectious, so they should by all means be regarded as a source of danger.

The most common method of transmitting the disease is by direct contact with the infected person—many mild cases are never recognized, but they doubtless spread the disease. Three persons may carry the disease. There may be carriers as in the case of diphtheria and typhoid fever. Toys, cups, saucers, food, pencils, chewing gum, thermometers, handkerchiefs, books, and other objects may become contaminated and spread the disease.

Milk is a rather frequent vehicle for transmitting the disease. The milk probably always receives its contamination from some human source. In cities where a large number of people have a common milk supply epidemics may become widespread.

Immunity. One attack of scarlet fever as a rule, protects the individual against another attack. Although there are a few instances where a second and a third attack has occurred.

Prevention. There is no vaccine for the prevention of scarlet fever. The prevention of the disease consists of two essential features—isolation and disinfection. The state law requires the quarantine of the family and the placarding of the premises. The placard is a protection to both the public and the household quarantined. It protects the public by warning them of the presence of the disease, and it protects the household placarded because the public cannot say that a case of contagious disease was concealed therein, and the disease spread therefrom. This protection should not be scorned at but demanded.

The patient should be isolated in a room as far removed from the other members of the household as possible. If it is possible for such an arrangement the attendant in charge of the patient should not come in contact with the other members of the household, certainly not with the small children.

Discharges from the nose, throat, ears and open sores should be disinfected and destroyed. The easiest way to dispose of such discharges is to collect them on rags or paper and burn them.

The patient's clothing, the bed linen and other articles must be disinfected. The simplest method is to boil them. Or one of the following solutions may be used, in which the soiled fabrics may be placed and allowed to thoroughly soak for two or three hours.

Solution I. Solution of formaldehyde (formalin) six ounces (twelve tablespoonsful); water one gallon. This mixture contains a little less than two per cent of formaldehyde. This solution does not bleach or injure fabrics.

Solution II. Carbolic Acid Solution. Add three ounces (six tablespoonsful) of crude carbolic acid, to half a gallon of water, or for larger quantities in the proportion. Mix thoroughly with a stick. This makes about a five per cent solution. This is poison if swallowed. A bottle of this solution should be kept in the sick room for the hands of the nurse, and a tub of it for the soiled sheets, etc.

All eating utensils, cups, forks, etc., should be boiled before being mixed with the other utensils of like nature, or before being used by any other person.

All articles of food left by the patient should be destroyed. Do not let other children touch or taste them.

After handling the patient, his bed clothes, or other articles in the patient's room, the hands should be washed in solution No. 2, given above.

Disinfection Important. At the termination of the quarantine the premises occupied by the patient should be thoroughly disinfected in accordance with the following directions. The disinfection should be done on a clear day. All bed linen, night garments, and other fabrics that will not be injured by boiling should be boiled. All other articles, such as mattresses, rugs, bed and other furniture should be placed out of doors in direct sunlight if possible. This should be done early in the morning. At noon they should be turned over, or around, so that all surfaces not exposed to the morning sun will be exposed to the afternoon sun.

After the room has been cleaned, the floor and woodwork should be thoroughly scrubbed with soap and water. They should then be mopped with a solution of 10 cups of carbolic acid to one gallon of water. The room should then be closed and allowed to remain closed until late in the afternoon, when it may be opened up, aired out, and the furniture replaced.

Before replacing the furniture and other articles they should be mopped off with the above solution. There is nothing mysterious about the spread and control of scarlet fever. The information and instructions given in this article are simple and easy to carry out under any conditions. And if they are carefully followed there will be little danger of the spread of the disease.

Rollings of State. Extracts from laws, rules and regulations of the State Board of Health: Section 5. Pending official action by the jurisdictional health officer, the attending physician or other person practicing the science of healing shall establish and maintain quarantine, rules and regulations as prescribed by the State Board of Health.

Section 23. In scarlet fever the quarantine of the patient and members of the family shall be for not less than thirty days.

Quarantine. Quarantine released only after complete disappearance of inflammation of nose and throat and complete cessation of discharge from nose, throat, ears, or suppurating glands.

No material, dishes, bedding, or clothing should be removed from the sick room without disinfection. Physicians should leave instructions pending the other members of the household, especially in the disposal of discharges from nose and throat of the patient.

Persons exposed who do not reside on the quarantined premises shall be kept under observation and observation of health officer and physician for a period of ten days. During this period, children must be excluded from school or any occupation that brings them in contact with the children or large numbers of persons, which includes the handling of milk or other foods.

If the patient lives on a dairy farm or is engaged in the handling of foodstuffs, the sale of milk or any other product is prohibited unless special arrangements are made with the health officer or physician in compliance with Sections 51 and 52. The health officer is further empowered by Section 52 to destroy all food products as provided in said regulation.

Heads of families and children who have previously been infected may, under the permission of the health officer or physician, be removed to another residence and kept in isolation for ten days before resumption of occupation or school attendance. The restrictive measures in Section must be complied with.

After recovery or death of a patient, children in the family are not permitted to attend school or any public gathering until ten days have elapsed. The premises must be renovated, cleaned and disinfected.

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BABSON SEES EARLY DAWN

(Continued from page one.)

earn anything. It is like attaching a carpenter's tool kit for a debt. It makes it impossible for him to work or earn anything and he never can pay up.

Obviously, if the reparations are to be paid, some plan must be worked out which will enable Germany to sell more goods in England, France and the United States than she is selling today. This suggestion, of course, raises a howl from our manufacturers and the manufacturers in all these other countries. They say that by such a plan Germany would ultimately be the winner rather than the loser because she would ultimately have the trade of the world. They say that this suggested receiver for Germany, if on his job, would develop great foreign trade and when the reparations were discharged, the German nation would still have this tremendous commercial machine. England has thought the thing through to this point and it is this that has made her so anxious to cut down German reparations.

"If such a commission should be appointed and should decide what Germany can and will pay, the shock to our commercial and financial organization could be somewhat reduced by having payments begin in small amounts and gradually increase over a period of several years, then gradually decrease again so that the commerce of the world and the financial machinery involved in international trade could adjust itself to the changes.

"The problem is very complex," continues Mr. Babson, "but it does not appear hopeless. Individually we can all insist that it be handled by a board of commissioners, who are Christian business men—who approach it with the idea of coming to the solution that will be best for the world as a whole. In the interest of future peace, we should protest loudly against any proposals offered by politicians, or others who are interested primarily in getting as much as they can for themselves regardless of the consequences.

"I am not pessimistic about the European tangle. I feel that it will work out some way. Secretary Hughes is making a very good start. Mr. William McAdoo also has some sound suggestions in connection with the matter. Men who were formerly rabid on one side or the other, are gradually showing an open-mindedness toward any practical solution. I still

Some Caddy



The only sea going caddy in captivity is Milton Cooper of the Ebor-Clades Club, Palm Beach, who uses his toes to retrieve balls from water hazards.

intellectual powers had increased so much faster during the last 50 years than his spiritual powers. Our system of control was out of equilibrium. The same condition still exists, and before the financial problems of Europe can be corrected the spiritual condition of Europe must be improved."

General business in the United States meanwhile continues slightly above normal plus a per cent to be exact. The action of foreign exchange and other international barometers strongly suggest that while things are looking very dark in Europe it is always darkest just before dawn.

With more than 300 persons in attendance, members of Sedgwick post G. A. R. held their annual memorial services in Salem Sunday.

Honolulu Police Very Busy in Past Year

HONOLULU, T. H., Feb. 3.—Honolulu police broke a record in the number of arrests made in 1922, according to a report made public here by the deputy sheriff's office. Arrests during the year totaled 5,725, exceeding the previous record that of 1921, by almost 700. Convictions, totaling 4,502, also broke a record. Fines and bail forfeitures totaled \$54,071.

Of the 5,725 arrested, 1,027 were Japanese, 525 Chinese, 123 Hawaiians, 242 Portuguese and 2,027 others. More than half of those arrested for violating the prohibition act were Japanese. Twelve persons were charged with murder, seven with manslaughter, forty-one with burglary and 2,230 with gambling.

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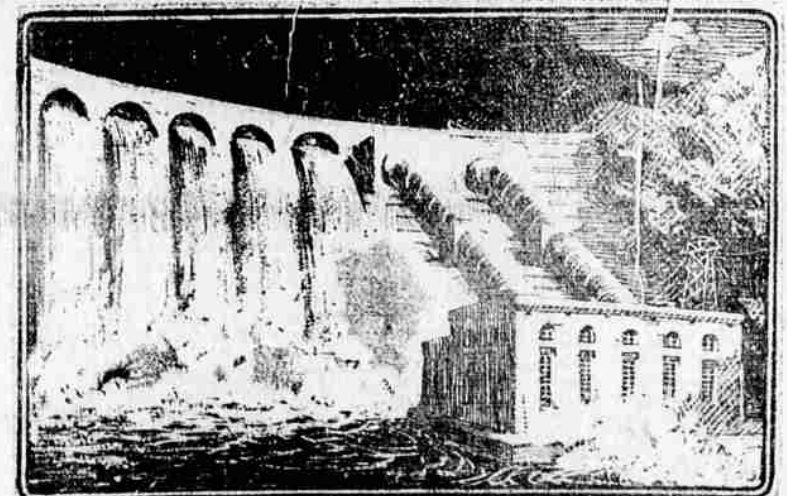
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