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and the civil authorities in South Africa had been aroused to recognise their responsibilities in the matter, and it is a little difficult to understand why the Secretary of State for War a couple of months ago put himself forward as the apologist for the administration of the camps. The first Blue Book on these camps (Cd. 819) presented to both Houses of Parliament by command of His Majesty, November, 1901, appears to have been compiled in South Africa in response to a request which the Secretary of State for War made to Lord Kitchener on March 18th, 1901, in the following terms: "Please send by next mail a dispatch giving full report on refugee camps in Cape Colony as well as Orange River Colony and Transvaal." The first report in the volume is made by Dr. George Turner, Medical Officer of Health, Transvaal, to Major-General J. G. Maxwell, Military Governor, Pretoria, and was transmitted by him to the Commander-in-Chief, South Africa. An extract from Army Orders, South Africa, March 7th, 1901, sets out that "the Military Governor, Pretoria, and the Deputy Administrator, Orange River Colony, will be responsible for the formation and maintenance of burgher refugee camps. In the Transvaal such camps will be administered by civilian superintendents, under the general management of Major Goodwin, Railway Pioneer Regiment. . . General officers commanding and commandants are responsible only for the external protection of these camps, and will afford the superintendents as much assistance as possible." Lord Kitchener forwarded to the Under-Secretary of State for War reports on the camps in the Transvaal on March 22nd, 1901, on those in the Orange River Colony and Natal on March 29th, 1901, and on those in Cape Colony on May 10th, 1901. The volume contains a series of subsequent reports forwarded at various dates down to September 20th, 1901, by Lord Kitchener to the War Office. Many of the reports thus forwarded by the Commander-in-Chief in South Africa were from civilian officials, but the Colonial Office and the Administrator (Lord Milner) make their appearance in this connection only in the second Blue Book (Cd. 853), from which it appears that at the end of September, 1901, some correspondence took place as to sending out matrons and as to shifting certain refugees to make room for others, but attention appears first to have been given by Mr. Chamberlain and Lord Milner to the prevention of the high mortality then prevailing on November 8th, 1901. The facts as to the divided control of the camps and the circumstance that the medical arrangements were under the civil administration, must have been known to Mr. Brodrick before Parliament was prorogued, and it seems a most remarkable circumstance that he did not make the position clear.

THE BOERS AND ENTERIC FEVER.

THE great epidemic of enteric fever which occurred in the army at and about Bloemfontein early in 1900 was followed by a serious prevalence among the more scattered forces in South Africa at the end of that year and the beginning of 1901, and the official returns for the last two months appear to indicate that the disease is again making its presence felt. The number of deaths from disease in the Field Force, South Africa, which had been 142 in September and 136 in October, rose in November to 236 and in December to 351. The causes of death are not indicated in the returns, but, relying upon previous experience, it will be safe to assume that a very large proportion of the deaths—probably about 80 per cent.—have been caused by enteric fever. There has all along been good reason to believe that the Boer forces have not suffered to anything like the same extent from this scourge of South Africa, and a piece of evidence on this head is found in a very interesting article in the current number of *Blackwood*. The writer does not give his name, but he states that he is of British nationality, and before the war was a district surgeon under the late Transvaal

Government. He was ordered to join the local commando as medical officer, and from early in October, 1899, until February, 1900, he was, with the exception of three weeks, with the Boer forces engaged in the unsuccessful siege of Mafeking. The force, he states, at first numbered 6,000 or 7,000, but later—about the middle of November—it was reduced to 2,000 by the departure of Cronje for Kimberley. After stating that the Boer wounded preferred to be treated in their waggons or tents in the laager rather than go to the hospital organised by a German lady, Mrs. Weiss, M.D., he continues as follows: "The health of the laager was wonderfully good. It would seem to an army medical man almost incredible, but it is nevertheless true that in my laager on the Lower Malopo we never had a definite case of enteric, and we were encamped on one spot without moving for two months, and then only moved twenty or thirty yards farther down, the reason of the move being to enable the waggons to be drawn closer together for purposes of defence. In the new spot the laager remained certainly for another three or four months. The oxen (several hundred of them) are fastened at night in the middle of the circle of waggons and tents, and the horses also, thus converting the whole space into a manure-heap, through which after a few nights no one would think of walking. In the warm weather the manure contained myriads of maggots, which in due time became myriads of flies. The flies have often been described, as they were just as bad in Natal; but to give some idea of their numbers, I may mention that once whilst sipping a glass of claret I counted fifteen flies on my lips—all these flies and all this filth and yet no enteric! Of course, the Boers now and then made efforts to clean up a little, but the centre of the laager was not often passable on foot; also our water supply was not of the best. We got all our water from the Malopo, a muddy little ditch 6 to 10 feet wide in most places, which had already passed through the upper (Zeerust) laager and also through Mafeking, naturally receiving a certain amount of sewage in its course through the town. There were 2 deaths (not in my laager) that I know of reported as 'fever' which might have been enteric but were, I believe, generally considered to be malarial; at any rate, granting that all deaths from sickness (about 8 or 10 at the outside) round Mafeking during the siege were from enteric, even then any will confess that they were wonderfully few." How this comparative immunity is to be accounted for is not clear. It has been suggested that the majority of Boers have suffered from enteric fever in childhood, an age at which the disease is, as a rule, milder than in adult life, and the official accounts of the habits of the Boer women in the refugee camps certainly lend some colour to the opinion. On the other hand, it would appear that the Boers are not much in the habit of drinking water, and that their usual beverage is coffee. The boiling of the water for making the coffee may be thought of as a reason why enteric fever has been comparatively rare among them.

LOCAL TREATMENT IN THE UPPER AIR PASSAGES.

THERE are certain regions of the body which for no obvious reason are frequent battle grounds for controversialists. It is mostly one of the natural orifices of the body that is the centre of disturbance, and the conflict, as a rule, rages the more fiercely the narrower the field in which it is fought. Within the past few months several illustrations of this general proposition have been given in the *BRITISH MEDICAL JOURNAL*. Whether these controversies tend on the whole to edification may perhaps be doubted; but until philosophy has softened the manners of men, they must be looked upon as regrettable incidents in the victorious march to the conquest of truth. The light of science may be "dry," but there is too often an undue proportion of heat rays in its composition. Hence scientific men