

4 (Preventive and Therapeutic Field Work)

4. Preventive and Therapeutic Field Work.

During the past quarter, only one field trip was made by this unit. That the individual card system initiated by the previously reporting Medical Officer is working out well is shown by the excellent statistics recorded by the Health Aides at the various sub-dispensaries. This system has been inaugurated in the newly assigned atolls, and is confidently expected to work out as well in those areas.

A break-down in statistics is shown in the following table:

| Atoll | Village | Yaws | Skin Diseases | T.B. | G.C. | Diarr-Hea | URI | Minor Inj. | Dental | No. of Vacc. |
|----------|---------|-------------|---------------|------|------|-----------|-----|------------|--------|--------------|
| Majuro | Majuro | 85 | 62 | 0 | 5 | 1 | 116 | 52 | 21 | 0 |
| Arno | Dodo | 0 | 9 | 0 | 0 | 0 | 6 | 11 | 4 | 18 |
| Arno | Arno | NOT VISITED | | | | | | | | |
| Arno | Ine | 3 | 66 | 0 | 11 | 2 | 1 | 0 | 2 | 0 |
| Arno | Melel | 24 | 33 | 0 | 4 | 1 | 3 | 0 | 8 | 9 |
| Mille | Lukonor | 16 | 20 | 0 | 6 | 0 | 5 | 4 | 2 | 0 |
| Mille | Nalu | 1 | 50 | 0 | 12 | 0 | 12 | 15 | 0 | 2 |
| Aur | Aur | 7 | 75 | 0 | 0 | 0 | 10 | 20 | 0 | 0 |
| Aur | Tabal | 8 | 123 | 0 | 4 | 0 | 20 | 61 | 5 | 0 |
| Maloelap | Airik | 0 | 13 | 0 | 0 | 0 | 2 | 4 | 0 | 54 |
| Maloelap | Kaven | 2 | 19 | 0 | 0 | 0 | 10 | 25 | 0 | 55 |
| Wotje | Ormej | 37 | 5 | 0 | 5 | 11 | 2 | 7 | 1 | 345 |

B (Health and Sanitation

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|--------|-----------|-------------|-----|---|----|---|-----|-----|---|---|
| Jaluit | Imroj | 5 | 100 | 1 | 7 | 0 | 137 | 50 | 0 | 9 |
| Jaluit | Wotle | 2 | 7 | 0 | 0 | 1 | 18 | 10 | 0 | 0 |
| Jaluit | Mejuririk | 3 | 4 | 0 | 3 | 0 | 20 | 6 | 2 | 3 |
| Ebon | Ebon | 5 | 8 | 1 | 12 | 0 | 100 | 100 | 6 | 0 |
| Namrik | | NOT VISITED | | | | | | | | |

Total contrasted for the two quarters show the following figures:

| | | | | | | | | | |
|-------------|-----|-----|---|-----|----|-----|-----|-----|-----|
| July - Sept | 235 | 632 | 2 | 177 | 4 | 478 | 473 | 107 | 68 |
| Oct - Dec | 198 | 612 | 2 | 69 | 16 | 466 | 365 | 51 | 495 |

The totals for this quarter include the newly assigned atolls of Jaluit and Ebon. The apparent discrepancy of having very similar figures despite the addition of new population figures is assumed to be due to the two factors, namely, that the methods of statistics-collecting have been different, and that because of insufficient visits, supplies were expended and village sick-calls hence dropped down. The totals are therefore given only to show relative proportions of disease incidence.

A further elaboration of the terms might be in order, inasmuch as some terms imply more than they mean. Under the heading of Diarrhea are included those cases formerly listed under Dysentery, for it is believed that the cases are due not to Salmonella, Shigella, E. Histolytica, or other gastro intestinal pathogens, but are more probably simple cases of mild gastro-enteritis, food poisoning, etc. This opinion has been gained by close questioning of both the Health Aide, and some of the patients reported as having

had "Dysentery". "URI" is a heading under which all symptoms such as cough, cold, sore throat, laryngitis, asthma, bronchitis, etc. are included. It is easily apparent that these complaints are relatively common among these people. This is thought to be due to the fact that the Marshallese, though clothed, have never had impressed upon them the necessity of changing to dry clothes after getting wet, or of attempting to keep dry in the first place. During the field trip visits, this is expounded to the people by the visiting Medical Officer and his Health Aide interpreter.

The large number of vaccinations (*) recorded in Wotje Atoll indicates a mass vaccination of the whole populace, regardless of history or evidence of past vaccinations.

It is noted, as previously, that skin diseases of all types represent the biggest group of classifications. The most common of these are Tinea Versicolor, Tinea Circinata, and Tinea Imbricata, with Impetigo being most prevalent among children.

It is of interest to see the falling-off of the incidence of clinical Yaws, with the onset of the prevailing winds and the consequent decrease in flies. Some of this decrease may also be due to general sanitary improvement.

The figures under the heading of Gonorrhoea (GC) are again problematical, inasmuch as the diagnosis in the field is made on the basis of signs and symptoms only. It may be noted that urethral or vaginal discharges, whether specific or non-specific in etiology, are sufficiently common among Marshallese in the age group of active sexual life, that the Marshallese language terms corresponding to gonorrhoea refer to it as the "disease of young men (or) young women".

Tuberculosis continues to be of minor significance insofar as being reported. It is brought to the Medical Officer's attention on a basis of symptoms only. A great many suspected individuals have been brought to CAU Dispensary for X-Rays of the chest but the significant complaints are found usually to be on a basis of chronic bronchitis, bronchiectasis, or asthma.

The dental problem continues to be of great importance. Due to time factors this set of figures for this quarter represents treatment given by visiting Medical Officers, who perform extractions only upon the younger age group with symptoms.

With regards to intestinal parasitism, there are some observations which the writer has made during fifteen months of work with the native population of both Guam and this area.

Perhaps the most interesting point to be taken is the almost complete absence of hookworm infestation discovered through routine stool examinations of patients admitted to the dispensary at Majuro. From the last one hundred stools examined (Commencing shortly before the beginning of this quarter), the following figures were obtained:

| | |
|---|-------------------|
| Necator Americanus----- | 4 cases * |
| Tenia solium----- | 7 cases |
| Ascaris----- | 5 cases |
| Stool negative for O&P or containing non-pathogenic parasites----- | 84 cases |
| Total | <u>100</u> cases. |

*It is of interest to note that all of these cases were transients from outside the Majuro District.

This series was chosen arbitrarily to permit easy percentage calculations but perusal of older records extending from the time of establishment of this unit reveal compatible percentages. Examinations were performed by a qualified Navy Laboratory Technician and in most instances were checked by a Medical Officer. The absence of hookworm disease is well substantiated by the non-existence of the severe anemias inevitably found in hookworm-ridden populace and further so in that routine differential blood counts have failed to reveal any significant eosinophilias.

From a clinical point of view, there were even fewer cases whose entrance complaints were explained by the presence of parasites.

It is routine procedure at this unit to examine the stools of all patients admitted to the ward, and also of all out-patients whose complaints refer to the gastrointestinal tract. All parasitism is treated in the routine Naval manner. (cf Tropical & exotic Diseases of Naval Importance, 1946).

In addition to instruction in the use of heads, and other sanitary measures, further preventive and therapeutic work is carried out in the sub-dispensaries. All Health Aides have been carefully instructed in the symptomatology of intestinal infestations for the purpose of having these patients examined by the Medical Officer on Field Trips, and after this examination are instructed in therapy.

Despite the apparent low incidence of parasitism so far encountered, careful and thorough surveillance of the situation continues.