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**Train Schedule**

EAST BOUND	
No. 12	3:37 a. m.
No. 8	4:48 a. m.
No. 2	7:55 a. m.
No. 6	1:12 p. m.
No. 10	3:43 p. m.
WEST BOUND	
No. 9	2:23 a. m.
No. 5	9:29 a. m.
No. 7	2:42 p. m.
No. 1	6:53 p. m.
No. 11	10:38 p. m.

(Continued from page 1)

one of its members. This commission has done nothing of any consequence towards the study and prevention of malaria, largely because of the fact that all of its members are engaged in other work and cannot give up their time to devote themselves to this work unless the commission had at least some financial support. It has none, and has no prospect of getting any.

I send you under separate cover a paper recently published in the Tulane Quarterly in which I refer to a meeting of those interested in the subject of malaria called by Dr. Driver, of Norfolk, Va. Dr Driver is quite enthusiastic and as I understand it has spent considerable from his own private resources for this meeting and in other efforts towards an organization for the purpose of eradicating malaria. I have just had a letter from Miss Ethel Neely, Norfolk, who tells me that they have just organized a commission for the study and prevention of malaria in Virginia and she is Secretary of that organization. I am not informed as to whether they have funds or the prospect of any. I do believe they have done more than organize. Their letter to me was to ask for suggestions as to the best way of attacking the problem.

Some time ago I got up a short paper giving in a simple form the most important facts that are necessary to be understood for the eradication of malaria, and submitted it to Captain Craig, Chairman of the commission for the study and prevention of Malaria of the Southern Medical Association. Captain Craig did not approve of introducing this paper as a lesson in the public schools or giving it to the public, because he thought it would be looked upon by the medical profession as antagonistic to them by giving so simple a cure for the disease. I had hoped that the commission would be willing to recommend it and that it could then be introduced into the public schools of the South.

There has been one other organized effort made to attack

the problem by the National Drainage Congress. It was proposed to fight malaria by draining the swamps and destroying and preventing mosquitoes. It should take very little argument to convince any thinking man of the folly of undertaking to drain the swamps of the Southern States sufficiently to prevent mosquitoes. The extent of the area to be drained is entirely too great for any such undertaking. It must be admitted, however, that whatever drainage is done will contribute to reducing the extent of malaria in the country.

With regard to the publication in the magazines and newspapers of information necessary for the eradication of the disease, I believe it would be wise to wait until such time as a properly supported organized and concentrated effort could be made. As I have said before I think it is only a question of time when some philanthropist will contribute the necessary funds for this purpose. It is not likely that Congress can be induced to take any steps in this matter because of the local nature of the disease and because of the existence of Health Departments already in the government, which it would be said ought to take this matter up. The disease has existed for a long time, the facts I relate have been known, most of them, to scientists for many years, and the different Health Departments of the Government have not done anything toward the eradication of the disease. Therefore I do not believe it is to be hoped that anything of consequence will come from that source.

Appreciating your interest in this matter, I am,

Very truly yours,

C. C. Bass.

**MALARIA**

Treatise by Dr. C. C. Bass—Medical Dept.—Tulane University—NO. 0

Malaria, Malarial fever, or chills and fever, is caused by living organisms, called malarial plasmodia which grow in and destroy the red cells of the blood.

Malarial plasmodia are carried from an infected individual to another person only by a certain kind of mosquito, the anopheles (an oph'e les) mosquito.

Anopheles mosquitoes are wild and breed and thrive chiefly in swamps. They sleep by day and feed during the night. The food of mosquitoes is chiefly fruit, honey and vegetables. When the female mosquito reaches the age to begin laying her eggs, she craves blood. At this time, even the wild Anopheles mosquito will venture from the swamp where she lives to residences and other places in search of a blood meal. If she draws blood from one who has malarial plasmodia in his blood, after a few days some of the plasmodia taken into her stomach break up into many small plasmodia in the head of the mosquito called the salivary glands.

A mosquito draws blood by means of a very fine hollow needle with which nature has provided her. This needle is connected with the salivary glands. It is first inserted into the skin when some fluid from the salivary glands is forced into the skin thru the needle. This fluid is the cause of the familiar itching and stinging of the mosquito bite and is injected to make the blood flow more freely from the skin thru the hollow needle.

If a mosquito have young malarial plasmodia in her salivary glands, bites another person she injects some of the plasmodia into him. He is now infected with malaria. Plasmodia in his blood multiply rapidly and he usually falls ill of the disease

in a few days. His blood can now infect other mosquitoes that bite him.

Those who sleep under bars and live in screened houses and who are never bitten by mosquitoes never get malaria.

The effect of the malaria is quite different in different individuals. In instances the infected persons may feel nearly well. In other instances chills followed by fever may occur every day or every second day. In still other instances the severest illness accompanied by fever and often by chills, may result. Death may be produced unless treatment is used. If not treated the disease lasts for many days, weeks, months, or even years.

Those who have malaria should consult their physician for advice and treatment. If they do not do this they should take the treatment here indicated.

Ordinary quinine is the specific remedy for malaria. If properly taken it will cure all cases. No other remedy is so good. When one is sick of malaria he should take a proper quantity of quinine every day until he has missed his fever for at least three days.

The proper amount of quinine to be taken each day by people twenty years of age or older is twenty to thirty grains, according to their size. The largest people take the largest dose. Those younger may take one grain for every year of their age. A ten year old child, therefore, would take ten grains per day. It is better to take one-fourth of the quinine at each of four different times of the day than to take the full quantity at one time. Quinine can be obtained at drug stores, put up in capsules containing one, two, three, four or five grains each. This is a convenient form in which to take it.

Malarial plasmodia live and multiply in mosquitoes only during the warm summer months. They die, tho the mosquito often lives thru the cold months, vident form in which to take it. Malarial plasmodia is carried over from one warm season to the next in the blood of the people who have had malaria, but who did not get entirely rid of it. A few plasmodia may exist in the blood, especially during the cool season without causing any illness. These, however, are capable of infecting mosquitoes when warm weather returns, and thereby other people. If everybody who had malaria last year would take the quinine as directed above before the warm season sets in, we should have no more malaria. The treatment is harmless. If in doubt as to whether you have had malaria, it is usually best to take the quinine.

Those who know these facts should endeavor to induce all members of their families, or other living near who probably were infected last year, to take quinine. It is important for you own safety for others to be free from malaria. A person infected with malaria is as likely to give you malaria as one who has yellow fever is to give you yellow fever. Both diseases are spread by mosquitoes in the same manner. Do not allow mosquitoes to bite you.

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