VENEREAL DISEASES.**PROPHYLACTIC AND ABORTIVE TREATMENT.**

In the House of Commons, on January 22nd, Mr. Macpherson, Under Secretary of State for War, was asked by Mr. Peto:

Whether it was proposed to take any further steps to stop the spread of infection by venereal poisons among British troops; whether there was any Army Order which forbade or discouraged the necessary prophylactic medical measures, and whether it was proposed to issue an Army Order instructing army medical officers of superior rank to take the necessary action as a part of their regular medical duties. Mr. Macpherson, in reply, said that there was no Army Order authorizing the use of such preventives or forbidding them. The answer to the last part of the question was in the negative. In reply to a further question, Mr. Macpherson expressed the opinion that this was really a national question and not so much a military question.

On February 1st Mr. Peto asked a further question with regard to a War Office letter to General Officers Commanding, dated March 18th, 1916, which stated that the Army Council could not accept suggestions with regard to prevention which would imply the adoption of any system of prophylaxis which might be said to afford opportunities for unrestrained vice, whether this deterred army medical officers from taking steps to prevent the spread of venereal disease in the army, and whether the Army Council would now withdraw any restrictions which prevented effective measures being taken to avoid the waste of man power in the army from this cause. Mr. Macpherson declined to add anything to his answer of January 22nd, and in reply to a further question stated that he could not give accurate statistics of the number of men who passed through hospital suffering from venereal diseases in a year, and who were at any one time incapacitated from that cause. He added that it was not to be inferred that medical officers were prevented from taking every possible step to cure the diseases.

We have asked Mr. E. B. Turner, Chairman of Representative Meetings of the British Medical Association, and Representative of the Association on the National Council for Combating Venereal Diseases, for an expression of his views, and he has replied as follows:

I have been asked by the Editor to furnish him with a statement from my personal knowledge of the matters referred to by Mr. Macpherson with regard to prophylactic treatment of venereal disease, and the orders issued by the Army Council relating thereto.

I have given lectures on venereal disease ever since the commencement of the war, and I have been distinctly directed and ordered by the authorities not to introduce into the lectures any description of chemical personal prophylaxis, or in any way advocate its use. The lecturers are allowed to impress upon the men the importance of the earliest possible treatment if they find themselves infected, and also the wisdom of consulting their medical officers with regard to preventive or abortive early treatment if they have run the risk of infection but do not yet know whether they have been infected. Thus far the lecturers have been authorized to go by the Army Council.

With regard to the whole question of the issue of prophylactic outfits my personal opinion is that it might not be of much real use in diminishing the actual number of cases of venereal disease occurring in the army. In the first place no one can say that the methods afford absolutely certain and sure protection from the infection either of gonorrhoea or syphilis. Figures are always fallacious, but in the cases which have come under my personal knowledge the percentage of failure has been very high, and this can easily be understood when one considers the conditions under which infection generally takes place. The principal medical officer of one of the largest hospitals for venereal diseases in London lately traced the source of infection in the last 100 cases admitted into that institution; he found that of these 100 men only 28 had got the disease from professional prostitutes; the remaining 72 were the victims of what might be described as the amateur flapper. It therefore stands to reason that in many cases the necessary precautions to avoid infection would have to be taken not in the "ordered circumstance of a harlot's room" but in the open air, in barns, copses, or commons, or behind a hedge, and therefore unless a man were extremely sober, very cold-blooded and skilful with his fingers, the chances are that he might fail to protect himself efficiently. It is pretty certain that an intoxicated or semi-intoxi-

cated man would almost infallibly fail in the minutiae of the protective process, and therefore become infected. If a man, as is very probable in some circumstances, incurs the risk of infection three or four times in a few hours, it is very improbable that before each performance he is likely again satisfactorily to protect himself.

It follows from all this that there will always be a certain percentage of cases infected even if prophylactic precautions are taken. If 100 men were exposed to the chances of infection unprotected, and 100 protected by prophylactic measures, in all probability the percentage of cases of infection would be a good deal larger in those unprotected. But if the doctrine of prophylaxis were widely preached and the efficacy of the methods insisted on, the chances are that a very much larger number of young men would run the risk of infection than is now the case.

I have no doubt myself that fear of contracting venereal disease of either sort is a very potent inducement to a large number of young men to keep straight, and I am sure that the impression that a perfectly sure method of avoiding infection could be used would lead a larger number of men to run the risk. If they know and thoroughly understand the fact that gonorrhoea is a very serious disease, and that syphilis in its latest stages spells ataxia and general paralysis of the insane, they are afraid of running the chance of contracting either.

It is a fact well known to all social workers that the standard of what I may call practical morality among young women of every class of society has gradually deteriorated since, some twenty years ago, the Malthusian propaganda began and the public display and advertisement of Malthusian appliances followed. The fear that a lapse from morality would mean an increase in the population was an extremely potent factor in ensuring the chastity of young girls.

I am certain that among young men the fear of infection with venereal disease acts in the same way, and I consider that on this matter I am probably better fitted to speak with authority than most men of my age and standing, because I was a competitor in first class athletic events until I was 38 years old, and before that time and ever since I have been in the closest touch with young men, athletes, in every class of the community, serving on committees and acting as president of athletic, cycling, and football clubs and as a member of the governing bodies of sport. If the idea that illicit sexual intercourse could be indulged in with impunity became at all general, I am sure that the gross number of cases of venereal disease would be by no means diminished, though the actual percentage of cases of infection after exposure would probably be a great deal lower.

Where I have spoken on several occasions at varying intervals at a camp, dépôt, or training centre for soldiers, I have been informed by the commanding officers that, after putting before them the results of these diseases and exhorting them by everything that a young man particularly holds sacred—his honour, his patriotism, his chivalry, and his sportsmanship—to keep straight, the first result of the lecture has been to induce a certain number of men to report sick who had previously been concealing disease; a second result was that, so long as the particular unit to which the lecture had been addressed remained, there was a diminution varying from 50 to 80 per cent. in the number of cases of venereal disease reported.

If prophylactic outfits are issued and prophylaxis taught in the army, it stands to reason that the practice must be extended to civilians. Workers in munition factories are nearly as important as soldiers in the fighting line, and among them there is a fairly extensive prevalence of the disease. Further, if these methods are taught and put before men, it follows that they must also be put before women, a prospect from which I am not ashamed to say I recoil with horror.

In giving this statement I have put on one side every question of religion, morality, or aesthetics, and have confined myself simply to what as a physician and man of the world I consider likely to happen.

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