Delusions About Hydrophobia.

By Rollin E. Smith.

It is not strange, perhaps, that hydrophobia or rabies, one of the most dreaded of diseases, should also, outside of medical circles, be one of the least understood, when it is considered that whilst the name is almost as familiar as that of the commonest complaint, the practicing physician who has ever seen a case is a rare exception. Indeed, so difficult is it to find a physician who has ever treated a case of real hydrophobia, or a sportsman, or a dog-fancier, who has ever seen a dog suffering with rabies, that one skeptically inclined might easily and conscientiously declare the disease a myth and a mad dog the creature of fiction.

To fiction, in fact, the widespread illusions are largely due that enshroud the plain facts, and by fiction they are perpetuated, whether written or by word of mouth.

The delusions are many. It is not at all difficult to discover some one who will relate how his grandfather killed a mad dog under peculiar and blood-curdling circumstances; and the brave boy who confronted a raging, frothing beast while the rest of the villagers made their escape is a matter of well-remembered childhood fiction.

I even knew a man, who, when a boy, was bitten by a dog supposed to be mad, and was miraculously saved from death by means of a mad-stone. This man firmly believed that the dog was mad, and as sincerely averred that the mad-stone, which was not laid upon the wound until some hours later, absorbed the virus and saved his life.

A mad-stone is harder to locate than a physician who has treated a case of hydrophobia; yet there is, in the minds of many people, a clinging and superstitious belief in its efficacy.

Another very popular delusion is the belief that the virus may linger in an inoculated person's system for years; and, although the dog was healthy at the time he bit the person, should he be attacked by rabies many months or even years later, then the latent virus in the victim's veins will, in sympathy, assert itself, and hydrophobia follow.

Many intelligent people having heard this believe it, never having heard it contradicted.
Although it is quite natural that one should have a revengeful feeling toward even a healthy dog that has bitten one, and want him killed, this belief of subsequent development is unquestionably largely responsible for many peremptory demands that the dog be killed. If the dog is dead, it is shrewdly argued, he cannot possibly become rabid at some future time, therefore the victim of his bite is safe from hydrophobia.

Before touching on hydrophobia, it may be well to note the effect that suggestion has in producing symptoms almost identical with those of the dreaded disease itself. In passing, it may be said that if suggestion can produce the symptoms, there is no reason why a mad-stone should not remove them. Pseudo-rabies is an affection of not infrequent occurrence. Though it closely resembles hydrophobia, it is only hysteria which develops in a nervous person who has been bitten by a dog. He may have paroxysms, and even imagine that he cannot drink. One physician, in writing of hydrophobia, says that it is not impossible that a majority of cases of alleged recovery from hydrophobia have been of the hysterical form.

Sometimes men even die from very dread of the disease. Some three years ago, at St. Michael’s Hospital, in New-ark, N. J., the death of one, Glenn, was reported as mainly due to this cause. He had been bitten by a dog some weeks previously, and insisted from the first that he would die. He also demanded the dog’s death—and the dog was, foolishly, killed. Fear of hydrophobia preyed upon this man’s mind, and he could talk of nothing else. He finally had many of the symptoms, including violent paroxysms, and died; but the decision of the attending physician was that he died of simulated hydrophobia complicated by pneumonia.

Occasionally paroxysms appear in a remarkably short space of time after the sufferer has been bitten, which proves conclusively that the attack is due to hysteria brought on by fright. The first symptoms of hydrophobia appear in from six weeks to two months after inoculation; yet fear of the disease—suggestion—may produce them in a few hours. One case that came under my observation was of a young man in New York City, who had been bitten on the wrist, while in play, by a pet Skye terrier. He was frightened, and thought of hydrophobia. He ran at once to a drug-store near by for treatment, and was told by a clerk that he was in danger of hydrophobia. Within six hours he had convulsions and other well-marked symptoms, and was taken to St. John’s Hospital. It was a clear case of hysteria, and not hydrophobia.

The almost universal suggestion of hydrophobia at the mention of a dog-bite is but the effect of published accounts of the disease. In its most horrible phases, for very few men have ever seen a case of rabies, and fewer physicians have ever treated a case of hydrophobia, so rare is the disease in this country. In 1892, Dr. William Osler, professor of medicine in Johns Hopkins University, wrote that since 1867 he had seen but two cases of hydrophobia. Dr. J. C. Warren, professor of surgery in Harvard University, wrote on the prevalence of the disease as follows: “New York City, in thirty-five years (dates not given), there were seventy-six deaths. In nine of these years there were no deaths. In Boston, in 1889-90, there was an epidemic of rabies, and some sixty cases (in dogs) were reported at the Harvard Veterinary Hospital. In the summer of 1890, three cases in man were reported in the Boston City Hospital.”

The prevalence of the belief in hydrophobia, in contradistinction to the number of actual cases, led finally, in May, 1897, to the matter being taken up by the American Kennel Club, of which the following gentlemen are the officers: August Belmont, president; Edward Brooks, vice-president, and A. P. Vredenburgh, secretary-treasurer. A committee was appointed by the club to investigate as to the prevalence of rabies in the United States. At the next annual meeting of the club, at Madison Square Garden, New York, February 23d, 1898, Dr. Rush Huidkoper, chairman of the committee, reported, on behalf of Drs. Austin Peters, of Boston; Leonard Pearson, of Philadelphia; Richard Price, of St. Paul; J. C. Roberts, of Agricultural College, Mississippi; Westley Mills, of Montreal, and himself, that during the previous summer and autumn they had issued several hundred circulars to prominent veterina-
rarians, health officers, and State officials throughout the United States and Canada. In reply to these, answers were received from all the States and Territories of the United States and provinces of British America, either directly or through veterinarians who had been residents of them, some 150 replies in all.

The country was divided by the committee into several sections, and each member investigated the source and accuracy of each reply, and summarized those of his own section, as follows: Dr. Peters, the New England States; Dr. Huidekoper, New York and New Jersey; Dr. Pearson, the Middle States; Dr. Price, the Western States; Dr. Roberts, the Southern States; Dr. Mills, British America.

In his report, Dr. Huidekoper summarized the results of the various reports as follows:

"In the New England States rabies is unknown north of Massachusetts and in Rhode Island. There is a small area in eastern Massachusetts where occasional outbreaks occur. In Connecticut only isolated cases have been recognized. In New York and New Jersey only isolated and rare cases are seen.

"In the Middle States, Pennsylvania has an infected district, extending some fifty miles west and south of Philadelphia, which originated in the suburbs of Philadelphia about 1870, and had gradually spread, but in it only about 200 cases have occurred in twenty years, and of these over 100 have been in a half-dozen localities. For the remainder of Pennsylvania, Delaware, Maryland, District of Columbia, and Virginia, the disease has only been known in rare and isolated cases.

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"In Canada a few cases have appeared in the province of Ontario, and rabies is unknown in the other provinces."

He also submitted a file of letters in which twenty accounts of accidents with rabid dogs were reported in the New York newspapers during the previous two years, and upon investigation they were found to be based absolutely upon imagination. In over half of them the street and number, and the persons described, could not be found by the city directory, the United States mail, or by personal search.

"Without any reflection," he added, "upon the honesty of the opinion of some of our colleagues who have reported isolated cases, we are convinced that many of these cases are errors of diagnosis, and that our report covers fully the extent of the disease in North America."

With the infrequency of rabies, and the still fewer victims of the bite of mad dogs, there is no good reason why any city should ever have a legitimate mad-clog scare, nor why the bite of a healthy dog should be dreaded as the bite of a rattlesnake.

The danger from snake-bite is apparently much better comprehended, broadly speaking, than from dog-bite. Every child that lives in the country learns that the little striped garter snake is harmless, and even should it bite one, no alarm would be felt. The harmless and the venomous snakes are distinctly classed and the danger understood. Yet—still broadly speaking—there is no distinction as to dog bites.

A little understanding of the disease would often allay the fears of timorous persons and relieve much suffering of mind. For instance, if your dog has been bitten by another clog supposedly suffering from rabies, it will show symptoms of the disease in three to four weeks, as a rule; and the duration of the rabies in a dog is never in excess of ten days. In the majority of cases, he dies on the fourth or sixth day after the appearance of the first symptoms.

Knowing that a rabid clog will, almost to a certainty, die within ten days; or, if he should recover, which occurs in exceedingly rare cases, the symptoms will be so marked in ten days or less that the disease may be recognized, the suspected animal should be kept in confinement during that period whenever possible. Do not kill such a dog, for if the dog is killed, any person who may have been bitten by him will have no peace of mind for months to come, and may take treatment at the Pasteur Institute, whereas ten days' confinement of the dog would have demonstrated whether there was any cause for apprehension.
It is highly desirable that the health inspector in every city take measures to secure suspected dogs and keep them in confinement, rather than to have them killed. This has been done in some cities, with the result that the dog has, in almost every case, proved his innocence.

As the period of incubation in man is of longer duration than in dogs, it is perfectly safe to wait until it has been demonstrated whether the dog has rabies, before taking treatment. But it is always desirable to cauterize the wound, for serious results may follow, as they may from the puncture of a nail or a splinter.

In man, the first symptoms of hydrophobia usually make their appearance in the second month after inoculation, and rarely after the third month. Conservative physicians regard with suspicion reports of the disease appearing after six, eight, or ten months, and there are no authentic records of its appearance after several years. In man, the disease is of short duration, lasting but two to six days, notwithstanding that the period of incubation is of several weeks.

The general fear of hydrophobia would, for lack of anything tangible to feed upon, die out, if its life were not continually fanned by fiction—fiction of the sensational press. The reporter, in his daily grind for “live news,” is undoubt-

edly often put to straits, and he recognizes the fact that the city editor looks upon a mad-dog scare as “good stuff.” The result is the appearance of numerous articles that are enough to cause any man to look with suspicion even upon his favorite dog; while the playful snarl of a pet terrier might well cause a gentler dog-fancier—one who shrieks at sight of a friendly little mouse—an attack of hysteria. As for children who read such sensational accounts, the fear of hydrophobia will follow them through life.

Tackling the best, and, in fact, the only evidences that can be obtained, namely, the writings of a few physicians and the report of the American Kennel Club committee, the decision must be that rabies is a rare disease in this country, probably not averaging two dozen cases a year. Then, too, it should be considered that the disease is limited to a few localities, and that every rabid dog does not bite some human victim. Add to this the established and recognized fact that only about 20 per cent. of the persons bitten by mad dogs are attacked by hydrophobia, and it will be realized that the disease is not, in this country, one to terrify communities, nor to narrow the souls and shatter the nervous systems of people who may be bitten by pet or even by strange dogs.

FIELD FLOWERS.

By Elwyn Irving Hoffman.

I cannot behold you, fair flowers of the field,
But my heart to your beauty must certainly yield;
And your color and fragrance take sway o'er my heart
With a strength more compelling than the magic of Art.
You are humble, and small, and grow near to the sod,
Yet you bear, in your freshness, the goodness of God,
And the magic of Love, and the sweetness of Faith,
And a grand nameless *Something* that lives beyond Death!