

A person with a cold should avoid getting the body chilled whether from cold drafts, wet stockings or other clothing, or any other exposure. If the cold is at all severe, it is best to remain in the house, or even in bed, with the air comfortably warm but well ventilated and not overheated nor stagnant. If the air is very dry, it may be rendered less irritating to the mucous membranes of the nose and throat by keeping a kettle of boiling water in the room. Hot drinks taken at bedtime to promote perspiration are often found helpful, but great care must be taken to avoid getting chilled. The bowels must be kept open, with mild laxatives if needed. The irritation in the nose and throat can often be eased by use of a hot gargle for the throat and a hot alkaline douche for the nose. For this purpose a solution made by dissolving half a teaspoonful of common salt and an equal amount of baking soda in a cupful of hot water is often found helpful. An atomizer or a glass nasal douche is a convenient aid in applying the solution to the mucous membrane of the nose. If the patient is running a fever and his condition is not readily improved by simple home remedies and a stay in the house, a physician should be called to take charge. Neglect of a cold often results in a long and serious illness.

AN INDIAN REMEDY FOR INFLUENZA

In publishing this paper the State Board of Health does not give its endorsement to the remedy until it has had further trial. We merely present the facts as stated by Dr. Krebs, with the idea of giving the matter publicity and encouraging others to give it a trial.

During the fall of 1918 when the influenza epidemic visited this section of Nevada, the Washoe Indian used a root in the treatment of their sick which was gathered along the foot-hills of this slope of the Sierra. The plant proved to be a rare species of the parsley family (*Leptotemia dissecta*), according to a report from the University of California.

The Indians gather this root in the late fall, November being considered the proper month for gathering. The root is used in the fresh or dry state. It is cut up and a decoction is made by boiling the root in water, skimming off the top and giving large doses of the broth. A pound of root is considered about the proper dose to treat a case of fever for three days, which is the longest time needed to break up a fever due to influenza or a pulmonary disease, although the Washoes use it as a panacea. Whether a coincidence or not, there was not a single death in the Washoe tribe from influenza or its complications, although Indians living in other parts of the State where the root did

not grow died in numbers. It was such a remarkable coincidence that the root was investigated by a practicing physician who saw apparently hopeless cases recover without any other medication or care of any kind. A preparation was prepared and employed in a great many cases among the whites, from the mildest to the most virulent types of influenza, and it proved, among other things, that it is the nearest approach we have today to a specific in epidemic influenza and the accompanying pneumonia. Where used early it proved itself to be a reliable agent in preventing pulmonary complications. Other physicians were induced to give it a trial, with the same results. It is beyond the experimental stage, as its therapeutic action in this direction is established and beyond any doubt. The cases in which it has been used run into the hundreds. There is probably no therapeutic agent so valuable in the treatment of influenzal pneumonia and, as far as being tried, in ordinary lobar pneumonia if started early. Its action on coughs is more certain than the opiate expectorants and its benefit is lasting. It acts as a powerful tonic to the respiratory mucous membranes. It is a bronchial, intestinal and urinary antiseptic and is excreted by these organs. It seems to stimulate the pnoegastrics and causes a slow pulse with increased volume and reduced tension. It is a pronounced diaphoretic and somewhat diuretic, and it is a stimulating and sedative expectorant. In large doses it is a laxative, and in extreme doses emetic.

To make a therapeutically active preparation, the proper variety of the root must be selected in the late fall and properly cured out of the sun. Its active principles must be extracted with as little as possible of the objectionable-constituents. The active principles of the root are decidedly complex. It contains a glucoside (as its solutions precipitate copper from Fehling's solution). It contains one or more alkaloids and an acid analogous to benzoic acid, one or more volatile and fixed oils, a resin, and a gum. It can be seen from this that it resembles a balsam from the fact that it contains an oleogumresin and an acid besides alkaloids and glucosides. One can at once appreciate the fact that a reliable pharmaceutical preparation representing the action of the root is not readily made. The volatile oil, which is one of the principal therapeutic agents, is lost in making a decoction.

This particular variety of *Leptotamia* is not as common as believed by some, and it is this particular variety that has medicinal or therapeutic virtues. It grows in dry sandy soil, as a rule, under or between tall sagebrush or greasewood. The plant grows from two to four feet high and has a blossom similar to wild parsnip and leaves like a carrot. It is a perennial, and the older roots frequently weigh from two to six pounds. It sprouts early in April, blooms in May, seeds in June, and

withers in July. A number of trials in transplanting the root have been made, but none were successful.

Leptotæmia dissecta is destined to become one of the most useful if not the most important addition to our vegetable materia medica.

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THE CONTROL OF VENEREAL DISEASES

During the recent world war, the United States Public Health Service has outlined a program for the suppression of, and inaugurated a nation-wide campaign against, venereal diseases. In this campaign they are seeking and must have the cooperation of every state and city board of health if notable results are to be achieved. Practically every state board of health in the United States, except that of Nevada, has indicated its willingness to cooperate, and has promulgated rules and regulations for the reporting and suppression of these diseases within its jurisdiction. The State Board of Health of Nevada has been unable to take part in this campaign because of a lack of clerical help and a lack of funds for the employment of such help. Moreover, the board has no epidemiologist or other field worker to organize such a campaign and enlist the cooperation of every physician, health officer and public health or charitable organization in the State; without which the campaign is sure to be a failure.

It is impossible to say how prevalent syphilis, gonorrhœa and chancre are in this State, but we know from the returns of the draft boards that approximately 3% of the young men who came up for examination in this State were at the time suffering from a venereal disease. This percentage is not as high as in some of the Southern States, but is high enough to show that venereal diseases are more prevalent than any other infectious disease. If 1 out of every 33 young men in our community were afflicted with smallpox or tuberculosis, we would not long hesitate to provide funds for the control and suppression of these diseases. It may be true that the venereal diseases are not so likely to prove fatal as smallpox or tuberculosis, but it is equally true that syphilis and gonorrhœa cause more sickness, misery and suffering, especially on the part of the innocent, than does any other contagious disease known to mankind. It is true also that those measures which have been successfully adopted in the control and suppression of smallpox, plague, scarlet fever, etc., will be equally successful in the control of syphilis, gonorrhœa and chancre if vigorously applied.

In taking up this problem, the first thing necessary for success is the reporting of all known cases to the health department. It must be