SPECIAL REPORT
EXERCISE AND HEALTH

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Useful information

The Faculty of Sport and Exercise Medicine
www.fsem.co.uk

The British Association of Sport and Exercise Medicine
www.basem.co.uk

Patient UK
www.patient.co.uk/directory/exercise-physical-activity-fitness-advice

A HUNDRED YEARS AGO

Extracted from a 1912 issue of *The Practitioner*

THE INUNCTION TREATMENT OF MEASLES

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THE INUNCTION TREATMENT of scarlet fever was introduced around 1890 by Dr. J. Brendon Curgenven.[1] Further, Dr. Curgenven said that, in his experience, it prevented the spread of measles and chicken-pox. Dr. Robert Milne, in a paper entitled "The Home Treatment of Scarlet Fever" and book advocated the treatment of scarlet fever by means of eucalyptus ointment, and also advised painting the tonsils with carbolic oil.[2,3] Dr. Milne has extended his treatment to measles. He speaks highly of the results.

The general trend of opinion among the medical profession towards the use of eucalyptus inunctions in the treatment of infectious disease – chiefly scarlet fever and measles – may be said to be of a non-committal character. Dr. Goodall, indeed, can see little if any value in the method (Medical Annual 1910). The chief exponent and upholder of the claims of eucalyptus inunctions is Dr. Milne, who seems to have little, if any, doubt as to its great value both in curing and in preventing scarlet fever. At the last meeting of the British Medical Association in the section of State Medicine, Dr. Rundle (Liverpool) stated that, in his opinion, Dr. Milne's home treatment of scarlet fever by inunction and throat swabbing was now discredited.

"My results suggest a decided value must be placed upon the eucalyptus inunction method of treating measles"

My own observations and clinical trials have been made with a view to showing what value, if any, can be attributed to eucalyptus inunctions and antiseptic treatment of the mouth and throat, in the treatment of measles. The children were not taken from the healthy, well-to-do classes, in whom, as a rule, the mortality from measles is low, but from the poorest class of the community, who are prone to all kinds of infections, and have poor resisting powers to the inroads of disease. That this is the case is shown by the large percentage of, often serious, complications. Further, except in those cases arising in the hospital, we did not get the children in the very early stage i.e. pre-eruptive stage. Often indeed they already had broncho-pneumonia.

I lay special emphasis on the need for careful and constant nursing, and for maintaining in the ward an even temperature of about 65ºF. In this respect, we were fortunate in possessing a trustworthy and capable nursing staff.

My results suggest a decided value must be placed upon the eucalyptus inunction method of treating measles, not forgetting, of course, the antiseptic treatment of the mouth and throat.

Comparing the case-mortality rate in my cases with that obtained in the 12 months previous to the commencement of inunction methods, it is seen that the former rate (5 per cent.), is less than half the case mortality rate of the previous 12 months (11 per cent).

These clinical trials and observations have nothing to do directly with the prevention of measles. But there is no reason why all susceptible children, in the time of an epidemic in large institutions and hospitals, or even in their own homes when the children are excluded from school, should not have the treatment in a routine manner. It can do no harm, it may prevent infection, it will certainly lessen the severity of the attack if it should come, and the danger of complications is lessened.

To sum up, therefore, I beg to offer the following conclusions:

1. The thorough rubbing in of eucalyptus oil all over the body, together with energetic local antiseptic applications to the mouth and fauces, are most useful adjuncts in the treatment of measles.
2. The case-mortality is decidedly lowered.
3. Even when serious complications are present, the treatment has a beneficial influence on the course of the disease.
4. Careful and constant nursing and maintaining of an even temperature of 65ºF are very important.

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