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TREASURY DEPARTMENT Columbia.

Public Health and Marine-Hospital Service of the United States

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WITH BIBLIOGRAPHY

BY

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and

C. F. WILLIAMS, M. D.

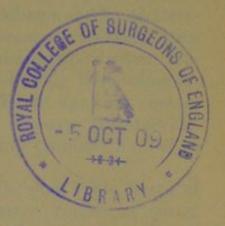
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THE PREVALENCE OF PELLAGRA IN THE UNITED STATES—A STATISTICAL AND GEOGRAPH—ICAL NOTE, WITH BIBLIOGRAPHY.

By C. H. LAVINDER, Passed Assistant Surgeon, United States Public Health and Marine-Hospital Service; C. F. Williams, M. D., Secretary South Carolina State Board of Health and State Health Officer; and J. W. Babcock, M. D., Physician and Superintendent State Hospital for the Insane, Columbia, S. C.

Forty-five years ago 2 cases of probable pellagra with mental symptoms were reported by Doctor Gray, of Utica, N. Y., and Doctor Tyler, of Somerville, Mass., at the annual meeting of American Asylum Physicians, held in Washington, D. C. Exclusive of 1 case reported by Dr. H. F. Harris, of Georgia, and 1 by Dr. S. Sherwell, of Chicago, in 1902, the disease has since 1864 till recently, 1906–7, either disappeared or been overlooked, or, which is more likely, the physician when first studying one of these puzzling cases and inclining to the diagnosis of pellagra has accepted too readily the assertion of all authorities that pellagra does not exist in the United States, and has therefore given another name to his case (see final note), although his professional conscience may never have been satisfied.

In spite of authoritative denial of the existence of pellagra in this country, a number of cases of the disease were recognized and reported in 1907 independently by medical officers of Alabama and South Carolina asylums. In the summer of 1908 the disease was identified with Italian pellagra by two South Carolina physicians who visited Italy for the purpose of studying the disease. Following these observations, pellagra has been observed in many different localities, such as Wilmington, Morganton, and Charlotte, N. C., Augusta, Milledgeville, and Atlanta, Ga., and in many places in South Carolina, as well as in other States.

For the last year and a half the South Carolina State board of health has been actively investigating the pellagra problem by special inquiry, conference, and original research with the cooperation of Surgeon-General Wyman, of the United States Public Health and Marine-Hospital Service, who has assigned one of the present writers (C. H. L.) to duty at Columbia and vicinity for this purpose.

^a Reprinted from the Public Health Reports, Vol. XXIV, No. 25, June 18, 1909.

Recently a letter of inquiry (see below) about pellagra was addressed by another of the present writers (C. F. W.) to the superintendents of state hospitals for the insane in the United States, and the following table embodies their replies:

To 164 inquiries 120 replies were received, about 20 being in the affirmative.

New York: Number of cases, few (near Brooklyn).

Pennsylvania (Dixmont): Number of cases, 1; recognized, 1909 (Hungarian).

Maryland: Number of cases, 1 or 2; recognized, 1909; probably existed since 1905; male, 1; female, 1.

Virginia (Staunton): Number of cases, 1 (?); recognized, 1908.

Virginia (Petersburg): Number of cases, 1 (?).

North Carolina (Raleigh): Number of cases, several; recognized, 2 or 3 years; probably existed 10 years.

North Carolina (Goldsboro): Number of cases, 8; recognized, 1908; probably existed 10 years; female, 8.

North Carolina (Doctor Taylor, Morganton): Number of cases, 8; probably existed 22 years.

North Carolina (Doctor McCampbell, Morganton): Number of cases, 20; probably existed 5 years.

North Carolina (Doctor Wood, Wilmington): Number of cases, 75 in State.

South Carolina State Hospital: Number of cases, 125; recognized, 1907; probably existed 20 to 30 years; male, 25 per cent; female, 75 per cent.

South Carolina (Doctor Williams, Columbia): Number of cases, 500 estimated in State. Georgia (Grady Hospital, Atlanta): Number of cases, 10; recognized, 1907.

Georgia (State Sanitarium, Milledgeville): Number of cases, 225; recognized, 1907; probably existed about 25 years; male, 25 per cent; female, 75 per cent.

Florida (State Hospital, Chattahoochee): Number of cases, 12; recognized, 1907; probably existed 4 years; male, 5; female, 7.

Alabama (Mount Vernon Hospital): Number of cases, 154, and 2 private; recognized, 1906; probably existed since 1906; male, small number; female, large number. Dr. G. H. Searcy estimates 150 to 200 cases in State.

Mississippi (Jackson): Number of cases, 1; other cases in State.

Mississippi (Meridian): Number of cases, 2; recognized, 1907 (?); male, 1; female, 1. Louisiana (Pineville): Number of cases, 3.

Tennessee (Baptist Orphans' Home, Nashville): Number of cases, 11.

Kansas (Topeka): Number of cases, 6 (?); probably existed 15 years; male, 3; female, 3.

Kansas (Epileptic colony, Parsons): Number of cases, 1; probably existed, native.

This table seems to show that there are records of about 1,000 cases of pellagra scattered in 13 States. More than half of these have been reported from asylums or similar institutions. Sporadic or suspected cases have been reported from Texas and Arkansas, as well as from New York.

Dr. E. J. Wood, of Wilmington, N. C., has records of 300 cases in the South, 75 of which occurred in North Carolina. It has been estimated that hundreds of cases exist in Georgia, and Doctor Walker, of the State Sanitarium, Milledgeville, says that 2 per cent of over 947 admissions in 1908 were cases of pellagra.

One of the present writers (C. H. L.) has reported to the Surgeon-General a conservative estimate of 1,500 cases in the Southern States since 1906.

The asylum officers in Maryland have not observed cases, but Dr. W. S. Thayer, of the Johns Hopkins Hospital, has recently recognized and reported a case of the disease in Baltimore and is satisfied that he observed a similar case several years ago (1905).

The disease does not seem to have appeared in the Tennessee Hospital for the Insane, but 11 cases of pellagra have been reported as

occurring in the Baptist Orphans' Home at Nashville.

Doctor Dewing, of the Long Island State Hospital, Flatbush, Brooklyn, N. Y., reports that he has had no cases of pellagra in his hospital, but "a few cases apparently from other sections of the country" have been observed in that vicinity.

One of the present writers observed in New York, in 1908, a case of the disease in a white American seaman in the coastwise service.

Although not within the boundaries of the United States, it deserves passing note that Dr. B. K. Ashford has reported the observation of 1 case in Porto Rico, and Dr. J. A. Hayne has observed 2 cases on the Panama Canal Zone.

While absolute accuracy is not claimed for these statistics, they may be regarded as a fair indication of the extent and distribution of pellagra as now recognized in this country, and their presentation at this time is made for the purpose of emphasizing the growing importance of the pellagra problem in the United States.

The following interrogations are used by one of the present writers (C. F. W.) in gathering statistics of pellagra:

- 1. Have you seen any case of pellagra in your institution or in your State?
- 2. How many cases have you seen?
- 3. How long since you recognized the disease?
- 4. If at all, how long do you think the disease has existed in your section?
- 5. What proportion were male? Female?
- 6. What was the occupation of those affected? Nationality?
- 7. Do the products of Indian corn (hominy or meal) form a part of the dietary of the patients and are those products derived from native or shipped corn?
- 8. Were your patients from the poor, moderate, or well-to-do classes?
 And were they from the city, town, or country?

Superintendent......

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Note.—There seems little doubt that the condition now recognized as pellagra has existed in the Southern States for many years—25 or 30 at least—and has been regarded as an unusual manifestation of tuberculosis, syphilis, malaria, acute delirium, hook-worms, dermatitis exfoliativa, eczema, etc. Careful search through medical literature may disclose the fact that cases of pellagra have been reported under these or other diagnoses.