

LEAGUE OF NATIONS.

C.H./Malaria/260

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HEALTH ORGANISATION.

Malaria Commission

REPORT BY THE CHAIRMAN OF THE MALARIA COMMISSION ON THE  
SECOND SESSION OF THE REPORTING COMMITTEE OF THAT COMMISSION

(London, June 23rd-24th 1938)

The Reporting Committee of the Malaria Commission held its second session in London on June 23rd and 24th. 1938 under the Chairmanship of M. Edmond SERGENT. (1)

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Third International Congress of Tropical Medicine and  
Malaria (Amsterdam, September 1938).

The Third International Congress of Tropical Medicine and Malaria will be held in Amsterdam in September. At its 26th session (November 1937) the Health Committee considered that the Malaria Commission should be represented at this Congress, and on its recommendation the Secretary-General entrusted this mission to the Chairman and Secretary of the Malaria Commission. It was also agreed with the organising authorities that the Chairman of the Malaria Commission should present a report on the work of the Commission since the Second Congress. In addition, the official presentation of the Darling Medal to Professor Swellengrebel will take place following the official dinner organised for those taking part in the Congress.

The Reporting Committee discussed the measures to be taken in preparation of the Malaria Commission's participation in the Congress, and in particular the main lines of the report to be presented by Professor Sergent. It was agreed that the latter should approach Professor Swellengrebel with a view to arranging for his report to be read at the end of the final session of the Congress on September 30th.

Moreover, the Chairman will prepare with the Director of the Health Section the agenda of the meeting of the Malaria Commission to be held in Amsterdam on September 28th 1938. This agenda will comprise a statement on the current work and on the reports already finished. The agenda and the statement prepared by Professor Sergent will be sent immediately to the members of the Commission to enable them to communicate in advance their observations and suggestions.

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(1) There were present: Professor E. Sergent (Chairman), Drs. Ciuca and Hackett, Lieut. Colonel Sinton, Professors Pittaluga and Rodhain. Professor Schuffner and Professor Serguieff were unable to attend.

Current Activities.

a) Report on the work of the Committee on the Standardisation of Terminology.

At its 26th session the Health Committee approved a proposal of the Reporting Committee that a sub-committee composed of Sir Rickard Christophers, Chairman, Dr. L.W. Hackett, Professor W. Schuffner and Professor Sergent should be set up to prepare a draft report on the standardisation of terminology employed in malariology. This sub-committee met from June 20th to 22nd 1938 and its Chairman made a statement to the Reporting Committee on the conclusions adopted.

The Reporting Committee thanked Sir Rickard Christophers. It proposes that the English and French texts of the draft report, consisting of a commentary and a glossary of technical terms with definitions and examples shall be distributed to all the members of the Malaria Commission in order to obtain their observations and if necessary to annex the latter to the final report.

b) Report by Dr. Hackett on the development of work on naturalistic methods of malaria control.

At its 26th session, on the recommendation of the Reporting Committee, the Health Committee invited Dr. Hackett, with the collaboration of a malariologist from the East, to prepare a critical report on what is actually being done in the field of anti-malaria action by naturalistic or "mesological" methods of control.

The Reporting Committee took note of a statement by Dr. Hackett on the present development of his work.

c) Suggestion by Professor Schwetz (Belgium) regarding the study of endemic malaria in Central Africa.

On submitting his observations on the Fourth General Report of the Malaria Commission, Professor J. Schwetz, member of the Commission from Belgium, proposed that a systematic investigation of various malaria problems in Central Africa should be organised. He signified his readiness to submit more detailed suggestions, and subsequently sent a note to the Malaria Commission, which embodied a programme of investigations into endemic malaria in Central Africa.

The Reporting Committee examined with great interest Dr. Schwetz' note, particularly that part relating to the distribution of the various varieties of Plasmodium among the natives of Africa. It is particularly interested in the proposed study of quartan fever and its relations with the varieties of local anopheles.

The Committee proposes as a preliminary measure: a) to collect epidemiological data from colonial health administrations in Equatorial, West and East Africa; b) to draw up a questionnaire for the same districts relating 1) to the varieties of Plasmodium which infect the native populations of different ages and at various seasons, and 2) to the geographical distribution of varieties of anopheles.

d) Proposal for a study of costs of treatment campaigns in connection with their results.

Several suggestions have been put forward in the past to the effect that an investigation should be made into the economic and financial aspects of questions relating to the use of quinine and synthetic drugs, and in its Fourth General Report the Malaria Commission emphasised the importance of a study of the problem of expenditure entailed by treatment and prophylaxis campaigns.

The Reporting Committee considers that before undertaking this investigation it would be useful, in view of the difficulties it presents, to collect documentary material as detailed as possible on the losses caused by malaria: mortality, incapacity to work, etc. and on the net cost of anti-malaria action ( drugs, anti-anopheline measures, etc).

In this connection the Committee recalls the usefulness of the study tour which had been fixed for 1938 with the object of visiting the anti-malaria campaigns carried on for some years in certain Mediterranean countries, notably in Italy, Albania and Greece. (See Report on the 26th session of the Health Committee). The Reporting Committee is of opinion that this journey could be made by a small number of members of the Commission, accompanied by malariologists who might be delegated by health administrations

It would be of advantage if this journey could be made before the Amsterdam Congress, during the month of September, 1938.

e) Preparation of the Intergovernmental Conference of American countries on Rural Hygiene (Mexico, November 20th. 1938).

In view of the importance of the Intergovernmental Conference of American countries on Rural Hygiene, the Reporting Committee had asked that certain reports of the Commission should be translated into Spanish. This request has been acceded to.

Professor Pittaluga informed the Committee of the measures taken in preparation of the work of the Conference as far as malaria is concerned.

The Reporting Committee approves these measures. It points out the expediency of a report by an American malariologist on malaria in the New World, apart from that of Professor Pittaluga devoted to the work of the Malaria Commission. The Committee expresses the hope that the greatest possible number of American malariologists, and particularly the American members of the Malaria Commission, will be able to take part in the work of the Conference.

f) Consideration of reports forwarded by the League of Nations Epidemic Commission in China regarding malaria surveys carried out in selected Chinese districts.

In September 1937 the Assembly of the League of Nations decided to give technical assistance to the Chinese

authorities in their action against epidemics.

Three reports concerning surveys in malarious districts of Pingkiang and Liuyang have been received from the leader of Unit No. 2 of the Epidemic Commission.

The Reporting Committee took note of the epidemiological information contained in these documents and of the plan drawn up by Dr. Robertson. It questions the possibility and the utility of a method of treatment extending over a period of seven weeks and comprising the use of a large quantity of quinine (approximately 28 grammes per patient). It wonders whether it might not be preferable to organise groups for the discovery and treatment of malaria which would return every 3 or 4 weeks to malarious regions to treat attacks and relapses.

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