

file:

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Eden

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Dr. Martin M. Kaplan, Chief  
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Geneva, Switzerland

Dear Martin:

I went over DG/69.2 while flying over the Atlantic, as I said I would. I have comments or questions of some importance concerning about 25 pages -- but insufficient secretarial staff to handle such a letter as this would mean. So let me just raise a few questions right away. The first one in particular affects one of the principal examples in the document:

Why assume that tularemia can only be treated with parenteral streptomycin? All the references I can lay hands on (including the APHA Handbook) say "streptomycin, broad spectrum antibiotics or chloramphenicol" are highly effective. This means that oral treatment is feasible, which means home treatment except for the sickest people.

A few more questions and comments:

B Why class typhoid fever as "lethal"? -- With antibiotic therapy it would rarely run over 5% CFR even in emergency.

pl4 -- We're constantly immersed in viruses from the day we are born, and the least likely ones to cause cancer would presumably be the most aberrant or virulent; according to present thinking it is the quiet "latent" types that are most likely to engage in gene mixing.

B1 -- I would hardly call typhoid fever "highly contagious".

B1 -- Experience with inhalation of VEE is already on record and one doesn't have to guess; ask Koprowski or Lennette, or read their personal account (JAMA 123: 1088-95, 1943).

B2 -- I wouldn't call JE lethal; in fact

B5 -- I think that the best evidence is that only about 1 in 1,000 JE-infected individuals develops CNS disease (see, e.g. Scherer et al., Am.

J.T.M.& H. 8: 707-715, 1959).

B5 -- The high lethality of the Far East Tick-borne encephalitis seems to have been confused with the milk-borne capability of the low-CFR Central European variety.

B7 -- I think the CFR for Yellow Fever is grossly exaggerated; Wil Downs has documented a number of cases with mild fever and nothing else.

B12 -- The highest attack rates on record for flu are scarcely 50%.

B14 -- RMSF -- High (80%) CFR is unique to the Bitterroot Valley, Montana. APHA Handbook says "20% in absence of specific therapy".

B17 -- Even pneumonic plague is much less contagious than it is reputed to be, Frank Slaughter's novels notwithstanding.

B18, 19 -- I've already questioned the CFR given here.

C8 -- Attack Rate of 80% for flu is pure fiction in my opinion. Same comment for JE.

D5 -- Preventive treatment -- covered above.

E2 and E4 -- I can't make 1 Kg go that far! How many people are postulated?

Hastily,



Geoffrey Edsall, M.D.  
Superintendent  
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GE:ht

cc: Mr. Meselson ✓