Pandemic in Cambridge 1918-19
December - March

Cambridge Daily News Tuesday 3.12.1918
BOROUGH FOOD CONTROL
Bacon-Eating and Influenza: Dr. Laird’s View
LOST RATION BOOK PENALTY

A meeting of the Borough Food Control Committee was held Monday evening, when a letter was read from Dr. A. J. Laird, the Medical Officer of Health in regard to rumours that have gone about the country that the eating of bacon has led to influenza. Laird declared that in his opinion there no ground whatever for such a theory. It was decided to charge people who lost their books and applied for another sixpence for a new book. The members present were: Messrs. W. L. Raynes (chairman), S. G. Campbell (vice-chairman), Briggs, Lavender, Mansfield, Mason, Squires, and Tweed, Lieut.-Col. B. Beales, V.D., Mrs. Golding, and Mrs. Aldren Wright, with the Secretary and Executive Officer (Mr. G. B. Kett).

Lost Ration Books. ..... 

Bacon and Influenza

The Secretary alluded to the statement made in some quarters that influenza was contracted from the eating of bacon, and said that bacon shops were complaining that they were getting large stocks on hand because people would not buy it on this account.

Mr. Squires: I should have thought was account of its peculiar flavour. (Laughter.)

The Secretary read the following letter, dated Dec. 2nd, from Dr. A. J. Laird, the Borough Medical Officer of Health, whom he had mentioned the matter to:—

With reference to our conversation this morning, regarding the possibility of the present outbreak of influenza being attributable to the eating of bacon from animals which have suffered from swine fever, I may say that I have carefully examined every available record, and cannot find the slightest evidence in support of this view. I have discussed the matter with bacteriologist in the Medical Schools, and he is of opinion that there is evidence of swine fever being transmissible to man. In view of the millions of people who regularly use bacon as an article of diet, if the disease were transmissible as suggested, many cases must have resulted, but as a matter of fact I cannot find record a single case. I think, therefore, there is no foundation whatever for the theory which has been advanced. It seems to be entirely without foundation, and, personally, I have no belief in it whatever.

The Chairman: Did one doctor not claim to cure 400 persons by treating them for swine fever.

The Secretary: The only known remedy for swine fever is to cut their throats and bury them in quicklime. (Laughter.)

Cambridge Independent Press Friday 6.12.1918

Many medical officers have received from the Local Government Board the influenza film illustrating necessary precautions.

Cambridge Daily News Friday 6.12.1918

London’s traffic problem, which has long been serious, has become more so than ever with the augmentation in the number of passengers. So badly have the wounded soldiers fared in the
scrambles that the 'bus conductresses have organised an unofficial “soldiers first” movement, but this only mitigates the evil. There are not enough vehicles to carry the people who have to travel and the result is bound to be, not only a dangerous scramble at the stopping places, but an overcrowding of 'buses and trams which, in days of influenza epidemic, is hardly less dangerous. The release of labour and petrol for the two hundred 'buses which are lying idle might well be urged on the Government as a matter of public safety.

Cambridge Daily News Saturday 7.12.1918

We have not yet seen the last of the influenza epidemic, apparently. It had seemed to be dying out steadily, but the mild weather of the last week or two has given it a new lease of life. This second “wave” is affecting London less severely than the Northern or Midland Counties. Yorkshire and Lincolnshire are the principal sufferers. In some districts of the former county, public meetings have been banned with a view to reducing risk of infection. It is a remarkable fact that the Lincolnshire victims include a number of land-girls. There are many pathetic cases of this sudden death of seemingly virile people. Allowance has to made in all epidemics for unintentional exaggeration of the ravages of the disease, but that the outbreak is serious in certain districts is proved by statistics of mortality. There is, of course, a serious shortage of doctors and nurses, which is, perhaps, unavoidable; but it does seem that some action might be taken to relieve the painful situation with regard to the undertakers.

Cambridge Daily News Saturday 4.1.1919

INFLUENZA IN ITALY

ROME. Friday

The Italian public health authorities state that the influenza epidemic has claimed 120,000 victims in Italy. Except in few towns the epidemic is decreasing. At Rome the number of deaths averages fourteen a day in a population of almost a million, but the latest figures from Turin give 84 deaths in one day.

Cambridge Independent Press Friday 10.1.1919

HEALTH OF THE COUNTY

The minutes the Public Health and Housing showed that the County Medical Officer had reported that 85 civilian cases of infectious disease (tuberculosis excepted) had been notified to the local sanitary authorities within the county from September 15th to November 23rd, 1918, both dates Inclusive, as against 174 in the corresponding period of 1917. Of these, 45 were cases of measles and German measles, against 111 in 1917. The incidence of notifiable diseases had been light, the number of notifications being less than half of the total received during the corresponding period of 1917. The measles outbreak recorded in the report for the preceding quarter was practically at an end. Unfortunately, the influenza epidemic, which commenced in October, and which rapidly attacked the Borough of Cambridge and a large number of rural parishes had taken a heavy toll of human life, which would greatly increase the death rate for the year. Up to November 23rd the number of recorded deaths attributed to influenza among the civilian population in Cambridge was 117, and it was probable that the mortality among the rural population would not fall far short of this figure. The outbreak was now steadily declining. The number of notified civilian cases of tuberculosis was 31 as against, as against 50 in the corresponding period of 1917. The decrease was probably due in great measure to the energies of medical practitioners being mainly occupied in coping with the influenza epidemic. A number of deaths from influenza had occurred among persons suffering from tuberculosis, who would fall ready victims to the former disease. The County Medical Officer of Health also presented an
interim report on the influenza epidemic, which was received, and it was resolved that the County
Medical Officer of health be directed to ask what steps were being taken by the sanitary
authorities in connection with the influenza epidemic.

Cambridge Daily News Wednesday 29 January 1919

Government departments appear to been uniformly unsuccessful in their dealings with the pigs.
The muddle that ended in Mr. Cautley's resignation and the bitter wail of the cottagers is fresh in
everybody's memory. Now retailers and the public are uniting in a protest about the glut of bacon.
In its very wise desire to secure enough fat food the Ministry bough bacon in prodigious quantities
and of a quality on which silence is the only discreet comment. It did not need the rumour that the
so-called influenza was really swine fever to persuade the public to stop purchasing and the result
is that there are large stocks - enough it is said to meet maximum demand for six months - which
will not be sold at anything like present prices. The new supplies are better, and the suggestion of
the retailers is that the present lot should first be cleared out at a reduction of fourpence per
pound.

Cambridge Daily News Friday 31 January 1919

ORPHANED BY INFLUENZA

The Central News New York correspondent writes: Reports to the New York State Department of
Charities show that 1,400 children were orphaned as a result the influenza epidemic, and their
maintenance will mean an annual cost to the State of about 350,000 dollars.

Cambridge Daily News Saturday 1 February 1919

London is experiencing a spell of severe weather and return a of the influenza scourge—a most
unhappy combination. It is a little early yet say what the influenza will amount to. Probably many
of the cases are those of severe colds, such as usual at this time of the year. But. obviously,
precautions must not be neglected. The enthusiasts for “face masks” will not I imagine, make
many converts. It not not require any more courage to face the West End than to face the
Germans with a gas-respirator on one’s face, but it requires a different sort courage and one that
is perhaps rarer. The most important factor in the situation is that of food and drink. Pressure is
again being brought to bear on the Government to make alcoholic stimulants more easily
accessible, and it is generally agreed that more dairy produce would make an enormous
difference. The sooner we get butter again the better for us, according to the doctors.

Cambridge Daily News Thursday 13th February 1919

Whether or not the influenza is really coming back, some people would have believe, I am by no
means sure, but if it is it would hardly appear to be of so virulent a type as that which we
experienced towards the close of last year. Severe colds are unusually common, it is true, though
not altogether surprising in view of the erratic action of the barometer. The serious element of the
“Spanish” flu, as we came to know it, was the deadly effect of the pneumonia which frequently
supervened unless the utmost care was taken. Medical men would seem to concur, however, in
the view that the new epidemic—if it comes —will be less severe in character. Already,
apprehensive persons have a whole series of precautions to adopt, from masks to gargles. One
doctor, I see, states that if some well known people were to set the fashion of wearing simple
muslin masks it would tend very materially to lessen the spread of this particular epidemic.
Perhaps a martyr to the cause of science may yet found, but I rather fancy ‘simple muslin’ hardly
sounds effective and artistic enough. So far and let us be thankful for while we may, influenza precautions are optional.

Cambridge Independent Press Friday 14th February 1919
Moose are dying from influenza in the woods of Quebec and Ontario

Cambridge Daily News Wednesday 19th February 1919
The increasing prevalence of influenza is engaging the serious attention of the Government, and details of the steps to be taken are to be made public in a few days. London's death-roll is rapidly increasing, the latest figures showing 100 deaths in week, compared with only 32 a few weeks ago.

Cambridge Daily News Tuesday 25th February 1919
Major Astor, replying in the House of Commons on Monday to Sir K. Wood (C.U. Woolwich West) said it was desirable to circumscribe infection from influenza as far as practicable, and various measures had been adopted. The Local Government Boards medical officers advised that notification of all influenza cases would not provide an effective means of controlling the spread of the disease, and that any advantages would be outweighed by the additional burden placed on medical men and health officials. Influenza pneumonia had, however, been made notifiable as from March 1st with the special object of enabling assistance to be given in cases of nursing or home assistance, which local authorities could provide or assist in providing. It was possible that influenza might be spread by people suffering from it handling food and drink but it did not seem practicable to remove the risk by legislative action.

Cambridge Daily News Monday 3rd March 1919
INFLUENZA AND INOCULATION
To the editor
Sir,—Most people are sick of the very name “influenza.” But perhaps some of your readers may be interested in the experience of one whose family has suffered such losses from the disease that for several years he has devoted his leisure time and personal savings to discovering, with the help of practising doctors, means preventing it.
1. No known drug is any real use a preventative.
2. People who regularly disinfect the throat and nasal passages during an epidemic enjoy a remarkable immunity.
3. The disease is caused by the invasion of several micro-organisms. One of these has never been isolated, but it practically powerless without the aid of its allies, all of which have been isolated. There are therefore many influenzas, which vary with the varying proportions of the mixture. People so inoculated thoroughly with a vaccine made from the known organisms either (a) escape the disease, or (b) take it in a mild form and escape complications.
4. People so inoculated are almost immune against common colds, bronchitis, and catarrh.
5. For two days after inoculation a person is very liable to catch the infection against which has been inoculated. The proper time for inoculation is between the waves of influenza. To be inoculated in the midst of epidemic, or when there is a case of the disease in the house, is a mistake. Neglect of this well-known truth is the cause of most of the distrust of inoculation among both medical men and the general public.
6. The disease is carried from person to person, and is not “in the air.” Therefore those who cough, sneeze, or spit in public places during an epidemic are little better than criminals. Whatever harm the disease is doing to the world, it is at least teaching us that all men are dependent upon one another, that we are our brothers’ keepers, that we cannot act just as we please without endangering the lives of our neighbours.
A short time ago there appeared in a great London journal article written by a lady doctor, who declared that it was wrong to take precautions against influenza. The disease, she said, was nature’s way of weeding out the unfit to live. Nobody, so far as I know, challenged these statements. Yet the truth is that the “fit” whom influenza does not kill, are to found among weaklings and consumptives; the “unfit,” who die, are usually the young, the strong, the bravest, and the best.—Yours, etc. W. H. S. JONES, St. Catharine’s College, Cambridge.

P.S.—Before I was inoculated I suffered from influenza some dozen times or more, on each occasion severely, with great loss of time, health, and money. Since I have been inoculated I have had only one attack, which was over in twenty-four hours. I caught it through being inoculated while an epidemic was raging.

Cambridge Daily News Monday 3rd March 1919

It is early yet to say what effect the medical council of war on influenza will have on the habits of the general public. Doctors are not expecting a general run on the vaccines, in spite of the strong opinion of the conference on the subject, the public being apparently very suspicious of this mode of treatment. One unfortunate result of the conference has been to plunge people into doubt on what had been considered one of the few uncontroversial questions in connection with the epidemic. Hitherto scarcely a voice had been raised against the official instructions to gargle with permanganate of potash or some other antiseptic. But this precaution, too, has now its critics, ranging from those who say it is useless to those who declare that it actually increases catarrhal secretions. Antiseptic snuffs containing bismuth, menthol, and similar ingredients are the latest craze.

Nobody will regret an increasing tendency to-day to turn down what has been described as the muzzling order: the horrifying suggestion that we should wear masks. It would not have been easy to popularise it if the whole weight of medical opinion had been behind it. But then the whole weight of medical opinion is never behind anything, except the not entirely disinterested dogma that it is wise to call in the doctor when you feel seedy. In the matter of masks, many doctors hold that they are as useless as they are anaesthetic. A demand that the Government should release more meat is another of the controversial proposals which are being energetically urged in certain quarters, while other enthusiasts are out for various measures of compulsion. Friday’s conference is, of course, a sufficient answer to any proposal that, in the present confused state of knowledge, any course of treatment should be imposed on the public against its will.

Cambridge Daily News Monday 10th March 1919

INFLUENZA AND INOCULATION to the editor

Sir,—The letter of Mr. W. H. S. Jones on the above subject contains a good deal of dogmatic assertion, and a remarkable amount of the principle “Heads I win, tails you lose!” The latter is probably quite unintentional, but it is a familiar failing of the enthusiast for inoculation. To suggest that the proper time for inoculation is “between the waves” of the disease—that is, when there is no chance of infection—is surely tantamount to a confession of its failure! And the writer’s confession that inoculation has actually given him the disease when the epidemic was raging should clinch the argument.

It is a fashionable theory that practically all diseases are caused by germs, passing from one person to another. It docs not seem to occur to those who hold this theory that, if it is true, the one person who should be avoided like the plague is a doctor! Doctors are habitually coming in contact with the germs; they cough, they may even sneeze; they certainly laugh, and they sometimes sigh. Germs must exude from them in myriads.

Let us ignore the germ-bogey and come to common-sense. Sanitation and inoculation go hand in hand—as, for instance, in a military campaign. When sanitation trips, inoculation proves broken
Influenza, however, does not appear to depend, as typhoid does, upon sanitary conditions. Some us—including doctors—believe, in spite of Mr. Jones’ dogmatism, that it is “in the air.” After every great war disease has broken out. After the Franco-Prussian War it, was small-pox; now it is a disease remarkably like small-pox, only without the rash. We call it influenza (although a remarkable variety of disorders have borne that name). It has appeared before—after some great floods in China.

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Millions of bodies, in all parts the world, are either not buried at all (these are animals, chiefly) or buried at an insufficient depth. The whole of the air is probably poisoned in a manner too subtle for detection, and where a close atmosphere has further deprived it of its oxygen, the poison is naturally more virulent. Isolated cases, however, are very frequent, and members of the same household have fallen victims, not the same, but to different “waves.” If they caught it from one another: they would fail victims to the same wave.

I write as a lay person, and my excuse for doing so the fact that on almost every point raised about influenza, the doctors differ. One theory is therefore as good as another. Mine appears to be more reasonable than most, for it has the advantage of analogy in history, and to dissociate the present plague, with its sudden deaths—so unlike anything in the modern records disease—from the war which is just over, seems to show wilful blindness. The idea is rejected simply to humour tee bacteriologists, who insist upon a germ.—Yours, etc. BEATRICE E. KIDD. Secretary. British Union for Abolition of Vivisection. 32. Charing Cross. S.W. 1. March 6th, 1919.

Cambridge Daily News Tuesday 11th March 1919

INFLUENZA AND INOCULATION. TO THE EDITOR

Dear Sir, I am very sorry that the Secretary of the British Union for Abolition of Vivisection supposes that I wrote to you about influenza upon the point of view a controversialist. Diseases are not banished by controversy and argument, but patient experiment. I wrote dogmatically because I thought that the conclusions I have drawn from long and costly experiments might induce other sufferers try, under competent medical advice, treatment which is most unlikely lo do any harm, while for years it has been successfully used to prevent pneumonia, catarrh and colds. If evidence is wanted, let those interested read the report of the medical conference held at the Institute of Hygiene on February 28th. I believe that most people who have lost dear ones through influenza will not be unwilling to try protect those who are still alive by obeying the advice given by speaker after speaker at that conference.

I can assure your readers that my “dogmas” are based on careful experiments. My statements may be true or they may be untrue, but I repeat that their truth or untruth can discovered by experiment, and by experiment only. Much remains to done: thousands of experiments need to be made tor the benefit of humanity and I am sure that no opposition to vivisection will prevent people from offering their bodies to be experimented upon it humanity is going lo profit in the long run.

My opponent quotes against me a proverb. “Heads win. tails yon lose.” I will quote in conclusion another. “The proof the pudding is in the eating.” Only by many inoculations can it be proved or disproved that inoculation is of value. Yours W. H. S. JONES.

P.S. I should be sincerely grateful if your correspondent would enlighten what I fear must be my stupidity on two points:

1. Why is it a ‘confession of failure’ to recommend inoculation ‘between waves’? The idea is to avoid the risk of infection during the two days immediately following the injections and to fortify the system against the coming wave. It is a good thing to be inoculated during an epidemic if the patient can be kept from infection for two days.
2. Why should the fact that we do not avoid doctors prove that diseases are not carried from man to man. They are carried from infected person to infected person, and if the doctor
Cambridge Daily News Thursday 13th March 1919

INFLUENZA AND INOCULATION. To the Editor

Sir, I was very much interested in the letter of Miss Beatrice E. Kidd re "influenza and inoculation." To my mind her argument was utterly lame and bald. As one who lived out in the tropics during the years preceding the outbreak of war I can strongly testify to the presence of a similar disease which as rampant in those days and whose only victims were active and apparently healthy individuals. I knew of a burly native drummer who was seized with the disease and medically diagnosed "acute influenza." Treatment proved unsuccessful; grew worse and subsequently succumbed within seven days of his admission to the institution. The post-mortem examination revealed the true nature of his sufferings, and it was then discovered that death was accelerated by pneumonia following influenza. The symptoms in this case were the same as they are to-day. Mosquitoes were then blamed for conveying the germ, and an attack on their harbouring places ensued. People went about at night armed with nets against the invasion of the pests, and all possible precautions were taken. Dogs, cats, and rats were suspected turn, and steps were taken to exterminate them. Yet withal the victims became more in numbers as the death-roll increased. Kissing was avoided in most cases, but I saw personally most of the corpses being kissed before removal, without a consequent spread of the disease. Ultimately the natives discovered that the 'new complaint' did not 'like' alcohol, so on the reappearance of any symptoms the sufferer was kept in bed for four days under heavy blankets, and at intervals given a mixture of rum and strong coffee, thereby producing perspiration, which resulted in the recovery of the patient. — Yours, etc.

'ALCOHOL JIM.' March 12th 1919.

Cambridge Independent Press Friday 14th March 1919

INFLUENZA IN THE COUNTY.
Schools Closed in Sixty Parishes

To such an extent is influenza prevalent in the County, that it has been found advisable to close schools in about 60 parishes. Many of the schools have been shut for several weeks. The epidemic commenced early in February, but was limited only a few parishes until the end of the month, since then a large number of the parishes have been infected, and school closure has been necessary, mainly as precautionary measure. The procedure that has been adopted by Dr. Robinson, the County Medical Officer of Health, working in conjunction with the Education Committee, has been to give out a general instruction by circular to the local school authorities that as soon as cases of influenza occurred in the parish, closure was advisable, and that their action would be supported the formal certificate on application. This policy appears have worked very satisfactorily.

In the opinion Dr. Robinson, the number of parishes seriously affected is not large, but undoubtedly there are parishes with a considerable number of cases. So far there have not been many deaths, but it is unfortunately the case that some have occurred among young children. On the whole, however, the epidemic does not seem to be as serious as the outbreak in the early part of the winter. The situation is not nearly so alarming now as then, but the epidemic is pretty wide spread. A few of the schools have already been re-opened, but the great majority are due to commence work again next Monday, and will do so unless there is an extension of the infection. The remainder are expected to open again in the following week.

A leaflet telling how treat the disease and to avoid infection has again been prepared by the Medical Officer and distributed through the agency of the schools. It is on much the same lines as the previous leaflet, but contains some modifications. A new sample of leaflet was sent down by the Board of Education, and Dr. Robinson has adopted some of the suggestions contained in it.
such as, for example, the wearing of a mask by those attending or nursing influenza patients, as a means of lessening the risk of infection.

Cambridge Daily News Friday 14th March 1919

INFLUENZA AND INOCULATION. To The Editor
Sir, Mr. W H Jones advises people “under competent medical advice to try treatment which is unlikely to any harm, while for years it has been successfully used to prevent pneumonia catarrh and colds” and refers us to opinions given at a recent medical conference.

I have attended a medical conference on typhoid inoculation, at which opposition views were deliberately suppressed, and at which the same claim of perfect harmlessness of anti-typhoid inoculation made. Moreover six leading doctors signed a statement that “with proper care inoculation has never been known to do a man harm.” Every observant soldier knows that that that statement is absolutely false. Men have died after inoculation with symptoms blood-poisoning, and in some cases this factor has been frankly acknowledged in the death certificates. I have seen men who, being in perfect health, were inoculated, and within an hour were stricken down with paralysis from which they have suffered for years. One man whom I know never did a stroke work as a soldier - inoculation made him an invalid immediately upon enlistment, apparently for life, and he was dismissed with pension. So much for the glib assertions of doctors that inoculation will not harm. Moreover, did not the majority of doctors swear by inoculation for small-pox, which was ultimately forbidden?

It is true that there is moral objection to volunteer human experiments in regard to any treatment, but it is serious thing for the race that the direct injection of poisons and disease material into the blood has become so fashionable. It is not nature’s way and it is admitted that, physically, the race is deteriorating. If nature is persistently outraged, it will deteriorate still more.

I consider it confession of failure to claim that inoculation, to do any good, must be undergone at a time when there is no danger, but that, when there is danger, it should be avoided. Mr. Jones now somewhat mollifies his original statement, by advocating inoculation during an epidemic “if the patient can be kept from infection for two days.” The idea of persons going about saying “I have not fallen a victim to influenza because I was inoculated several months ago” is absurd, because a still greater number of persons are also exempt, who have never been inoculated at all.

I do not deny that some diseases, like small-pox, are contagious (and also, in my belief, spontaneous, but I do assert that infection is grossly magnified to suit the germ theory. If all that germ theorist doctors preach were implicitly believed, they themselves would seen the to be greatest danger to the public existing, because they simply cannot escape contact with germs. In fact, if germs were dangerous as they allege, the race of doctors would soon be extinct.- Yours.

Beatrice E. KIDD. Secretary, British Union for Abolition of Vivisection. 32 Charing-cross. S.W March 13th 1919

Cambridge Daily News Monday 17th March 1919

THE INFLUENZA EPIDEMIC.
Sir, —Influenza has become a menace to the race. Recent Statistics are enough to produce decided uneasiness in the public mind which is not likely to be allayed by the candid admission of medical men at a recent meeting in London that they know of no certain remedy. Of course a new serum or vaccine will emerge only to be found wanting as in consumption. It is true a single doctor, apparently a voice crying in the wilderness, gave his opinion that influenza was dangerous only in cases of low vitality, and that the real safeguard was to keep up the general health at a high level.
That this will prove the solution the problem of influenza as well as consumption can easily be shown. When the vitality is high, there is strong resistance to noxious bacilli; when the vitality is low the resistance is feeble. Nature provides immunity for the healthy person through the preponderance in the blood of what are termed hydroxyl ions as opposed to hydrogen ions. The real problem in guarding against influenza is how to convert hydrogen into hydroxyl ions. This looks formidable on paper, but in practice it is the simplest thing in the world, and shows how much her human children have yet to learn from Mother Nature.

The first thing is to understand the meaning of these terms. Life is like a fire burning. Hydrogen ions form the waste matter which must be burnt off by chemical union with oxygen supplied in the air we breathe. The vast majority, as can be seen from a single glance at their general appearance, are suffering from lack of air, and are in a chronic condition of hydrogen ions preponderance: hence they succumb easily to attack as of influenza, the bacillus finding soil to breed rapidly in. Keep up the hydroxyl state of the blood by taking a larger quantity of fresh air and the bacilli cannot multiply. This fact knocks to pieces the theory of sera or vaccines as preventives of influenza.

The second thing is to understand the vital importance of the experiment. The Ministry of Health is going have a Research Department in the interests of national health. Each one of your readers can easily and without cost perform an experiment which will help solve the problem of influenza. Do not wait for an attack, but start the habit of breathing copiously for five minutes three times a day, morning noon and evening. The proper way to do is not to snivel noisily, but to draw the breath gently and noiselessly from the centre of the nose upwards towards the centre of the forehead, letting the chest expand without effort. It would take too long to explain how this reader breathing fuller and easier, but when it has become a habit, its effect upon the general health body and mind is remarkable. If you are laid up, keep on breathing in this manner as much as possible. When the nostrils are free from congestion the benefit will soon be seen.

Cambridge Daily News Thursday 27th March 1919

As far as the public is concerned, the most interesting feature of the clinical meetings of the British Medical Association, to be held here next month, will be the discussions on influenza, for which the ‘preventive’ experts are to join forces with the ordinary medicine section. It can hardly pretended that, after the recent conference, there is any popular expectation of great enlightenment. “All previous instructions cancelled” appeared to be about the sum of what the doctors had to tell us last time. There will be a long discussion, I am told, on the rival claims of Pfeiffer’s bacillus and an organism recently discovered in Paris and administered with varying results to mice and guinea pigs to be ‘fons et origo mali.’ The practical bearing of this, apart from serums, a medical friend tells me, is that it will throw light on the usefulness or lack of it of the influenza masks. There will not be a great demand for them, whichever microbe is found guilty.