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 THE MEDICAL STUDENT AND PREVENTIVE MEDICINE.

to them far worse instances of carelessness than he had ever mentioned. Such an experience must be of permanent value. For the effect is not only on the students actually participating, but is talked over by them with their fellows, and this has far more lasting effects than anything the lecturer can say.

An instance of this occurred this year. Advantage was taken of the quarantine of a large passenger vessel for smallpox to employ as temporary quarantine assistant a sixth-year student, who happened to be exempt from attendance at lectures. In company with the Quarantine Officer he was in residence on the Quarantine Station during the whole period of active quarantine, and not only saw the working of the station in every detail, but himself assisted in the daily thermometer parade, diagnostic tests, and so on. He proved a valuable assistant, and confessed afterwards to great experience gained. Not only was his practical knowledge increased and his interest in prevention deepened, but the writer had the unexpected pleasure of subsequently hearing him read a paper to the Clinical Branch of the Medical Students Society, which dealt with his experiences, impressed on the other students the points of diagnosis between variola and varicella, which he had gained for himself, discussed the epidemiology of the outbreak, the varying results of vaccination, the consequences of slackness in a ship's medical officer, and the notes of a "case, unique from the point of a medical student, in that the patient, perfectly healthy, was under observation for four days before he developed any symptoms, and was watched as the symptoms of smallpox developed one by one."

The success of this experiment suggests that it would be profitable for the Department in future years to arrange for short camps at the Quarantine Station for small groups of medical students, similar to the camps of forestry and geological students which are held elsewhere. These camps could be held in the last few days of term or in short vacation. The administrator and lecturer could meet together and work with the students. A definite programme of daily work on the station could be arranged; also the group of students could be put through the actual drill of the contact camp, or could accompany the Quarantine Officer in his routine inspection of a vessel at its first port of call, or in a night fumigation, and generally absorb the atmosphere of the station. For the best lesson in prevention is an efficient administration in action.

The First Course for the Australian Diploma in Tropical Medicine and Hygiene.

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IT has been realized for some time that Australian graduates proceeding to tropical medical work in Papua or New Guinea, or even in tropical Australia, without sufficient knowledge in tropical medicine and hygiene laboured under great disadvantages. The nearest Tropical School was at London, and unfortunately in these days graduates

can seldom spare the time and money necessary to travel and obtain the excellent tuition obtainable at the London School of Tropical Medicine. It was therefore decided to endeavour to provide some tuition in tropical medicine and hygiene at the Australian Institute of Tropical Medicine, Townsville.

No matter how careful the preparation, the launching of a new training school must always be beset with difficulty, and its success or failure is difficult to predict. One might almost compare it with the launching of a new ship—first the design, then the care devoted to building, then the fittings. Next comes the rough weather; how must she difficulties commence—will she stand the rough weather; how must she be altered; what is her best cruising speed? So it is with a post-graduate course of this nature; and only time will demonstrate whether the designers, builders and crew will be successful in their efforts.

At this stage it would be well to mention something as to the nature of the training offered by the Australian Institute of Tropical Medicine, Townsville.

First, the course itself occupies three months, followed by an examination lasting twelve days. If candidates are successful in this they are granted a Certificate in Tropical Medicine, or if they obtain an average of 75 per cent. in all subjects, a certificate with distinction.

After the examination for the certificate, an examination of twelve days' duration takes place for such candidates as are sitting for the Diploma in Tropical Medicine. This is granted by any of the three Australian Universities possessing Medical Schools, namely, Melbourne, Sydney, and Adelaide, to a candidate under the following conditions:—

- (1) That he is a qualified medical practitioner registered in one of the States of the Commonwealth.
- (2) That a period of not less than twelve months has elapsed since he obtained registrable qualifications in Medicine, Surgery, and Midwifery.

- (3) That he (a) has passed Part I. of the examination for the Diploma in Public Health of the University concerned; or (b) presents a certificate to the effect that he has pursued a prescribed preliminary course of laboratory instruction at the University concerned extending over a period of at least one month.

This examination is set in such a manner that it is more difficult than that for the certificate, and questions are set which test whether the candidate has done any reading outside his actual lectures. The candidate has also to pass an examination in case taking.

The subjects covered include, *inter alia*, Tropical Medicine and Hygiene, Protozoology, Helminthology, Medical Entomology, Bacteriology, Tropical Pathology, Immunity, Technique, Tropical Ophthalmology, and demonstrations of various aspects of practical tropical sanitation. The theoretical part of the course covers about 180 hours, and the practical part 150 hours of actual teaching and demonstration. Besides this, various field expeditions, &c., are arranged as opportunity admits.

AUSTRALIAN DIPLOMA IN TROPICAL MEDICINE.

The Institute has the use of two wards at the Townsville Hospital, and such cases of tropical medicine as present themselves are demonstrated to the student. Beside the Institute staff, independent lecturers deliver lectures in Tropical Surgery, Dentistry, and Quarantine administration.

Post-graduate students entering for this course should be in the best of health and realize that it will be no holiday. The hours are from 9.30 a.m. to 5 p.m.

Four students were present at this first course, and proved themselves very keen, setting a very high standard. Unfortunately an outbreak of dengue fever devastated the class, and a severe attack, with prolonged convalescence, compelled one student to give up his work. The students thus early came into contact with the practical side of tropical epidemics and their effects.

Three students sat for the certificates, and all passed, one with distinction. One candidate, Dr. R. L. Bellamy, sat for the Diploma of Tropical Medicine under the control of the University of Sydney, and passed, thus having the distinction of obtaining the first Australian Diploma of Tropical Medicine. As this candidate has had many years' medical experience among the natives of Papua, and had worked extremely well, the honour is well deserved.

It is hoped by the staff of the Institute that as long as they are entrusted with the duty of carrying out these training courses, that they will, with experience, continually improve, and that by their efforts medical officers going out to tropical colonies and dependencies from Australia will at any rate have the necessary knowledge on which to build a successful tropical practice.

Examination of Mine Employees, Western Australia.

By D. C. ROBERTSON, M.D., D.P.H., Director, Division of Industrial Hygiene, Commonwealth Department of Health.

A mine investigation into the physical condition of the metalliferous mine employees, Western Australia, has just been completed by the Division of Industrial Hygiene, of the Commonwealth Department of Health. This enquiry was undertaken at the request of the Government of Western Australia, and involved the examination of 4,068 workers.

In 1922 the Commonwealth Government announced its intention of installing a Health Laboratory at Kalgoorlie, the largest mining centre in the State of Western Australia, and stated that this laboratory was to be equipped with a modern X-ray plant in order that the study of industrial disease might be facilitated.

The Government of Western Australia entered into negotiations with the Commonwealth Government, and requested that the latter, on completion of the laboratory, carry out an investigation into the