

VENEREAL DISEASES IN NEW YORK CITY.

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Syphilis.

During 1921, a total of 19,383 cases of venereal diseases were placed on register, of which 14,096 were syphilis, and 5,287 gonorrhoea. This figure represents a decrease over last year of some 4,000 cases. To explain this decline, it is necessary to examine into the manner in which cases of syphilis are placed on our records. There are three sources from which we obtain our reports. First, and most important, is the laboratory. Specimens of blood are sent to the laboratory from various sources for the Wassermann test; and all cases from which specimens give a reaction of two-plus or over, are considered cases of syphilis, and so listed in the Department. It is evident, therefore, that the number of cases of syphilis placed on our records will vary with the number of specimens sent to the laboratory, by private physicians and others, and the number of these that are found positive.

It is reasonable to expect that with an increase in the number of specimens sent to the laboratory there would also be an increase in the number of these found positive and, consequently, in the number placed on our records. Examined from this standpoint, the statistics for the past several years give some interesting information. Beginning with the first year since the Department established a Wassermann test service, the following are the number of specimens examined, and the percentage found positive:

Specimens Examined for the Wassermann Test and Percentage Found Positive.

Year	Specimens	Per Cent Positive
1913	18,750	40
1914	42,699	33
1915	51,271	28
1916	56,604	27
1917	67,857	23
1918	63,166	21
1919	71,145	18
1920	80,822	18
1921	85,156	10
Average yearly		24

It will be noted that from 1913 to 1921 there has been a steady decrease in the percentage of specimens found positive by our laboratory. How are we to interpret this? Whether this is due to improved treatment which patients are now receiving, or to the fact that a larger number of non-syphilitic individuals are being examined for the Wassermann test, or that there is some change in the effectiveness of the technique of the Wassermann test, it is difficult to say. At any rate, if the percentage of positive Wassermann tests found during 1913, namely, 40%, had been maintained during 1921, our records would show an increase of 14,370 cases. Even if the average of all the nine years, from 1913 to 1921 inclusive, 24%, had been maintained in 1921, our records would have shown an increase of 2,983 cases over the preceding year.

Reported Cases of Venereal Diseases in New York City, 1920-21.

	1921	1920
Total Blood Specimens sent Laboratory for Wassermann Tests.....	85,156	80,822
Not Examined	13,390	7,154
Found Positive	8,535	14,420

Total Blood Specimens sent Laboratory for Gonorrhoea Complement-Fixation Test	8,076	9,776
Not Examined	192	401
Found Positive	163	487
Total Smears sent to Laboratory for Examination for Gonococci ..	12,411	11,540
Found Positive	1,584	1,730

Second, we have cases reported by various institutions. During 1921, the number of cases of syphilis reported was 1,336 greater than in 1920. The corresponding figures are 2,580 for 1920, and 3,946 for 1921. While this is a slight increase, it certainly does not represent the total number of new cases attending the clinics in this City. This source should be a very fertile one if thoroughly tapped. The clinics and institutions in this City are apparently not complying with the Department's regulations with reference to the reporting of venereal diseases. If they were, we would be getting thousands of cases more than are now reported. Some drastic steps must be taken to compel clinics to live up to the regulations. There are large institutions in this City that are treating hundreds of cases, and that practically never report any of them.

Third, we depend on private physicians. The number of cases reported by physicians, directly, was 1,250 less in 1921 than in 1920. This source of report is not likely to become of prominence; first, because most of the reports of cases treated by private physicians are made through the laboratory of the Department which makes the diagnostic tests, and second, because physicians, generally, are averse to reporting cases. A neglected source of information and one that is important is the private laboratory. Time and again, it has been pointed out that private laboratories are not reporting cases of venereal disease that come to their attention.

Analyzing the syphilis figures for the various boroughs, we find that, while there has been a falling off in the number reported as compared with previous years, the Borough of Manhattan, as usual, reported the greatest number during 1921; Brooklyn is next in order, followed by The Bronx, Queens, and Richmond, respectively. It is interesting to note that The Bronx, with a population of more than 800,000, reported a surprisingly small number of venereal disease cases, only 829 having been reported for the entire year, from all sources, in that Borough. Queens and Richmond show an even smaller number, proportionately, but, it should be remembered that the venereal disease activities in these Boroughs, (Queens and Richmond) have, for various reasons, had to be almost entirely neglected.

Analysis of Syphilis Figures for the Various Boroughs.

		Reported by Laboratory	Reported by Institutions	Reported by Physicians	Total
Manhattan	1920	8,703	1,252	2,166	12,121
	1921	4,981	2,541	1,590	9,112
The Bronx	1920	1,011	130	390	1,531
	1921	542	108	179	829
Brooklyn	1920	2,955	1,150	961	5,066
	1921	1,933	1,256	601	3,790
Queens	1920	279	29	139	47
	1921	139	33	82	254
Richmond	1920	202	9	64	275
	1921	85	9	17	111
CITY	1920	13,150	2,570	3,720	19,440
	1921	7,680	3,946	2,470	14,096

Gonorrhoea.

The reported cases of gonorrhoea show a slight increase over 1920, 5,287, as compared with 4,535, in 1920, that is an increase of 752. The increase is to be particularly noted in the number of cases reported by institutions, which exceeds the figures of last year by 699. There has also been a very slight rise in cases directly reported by physicians. As just stated, the total number of gonorrhoea cases is 5,287, for the entire year, which is undoubtedly but a very slight fraction of the total number of cases in the City. If our statistics are to serve any useful purpose, it will be necessary to take active measures to compel more thorough compliance with Section 88 of the Sanitary Code.

Analysis of Gonorrhoea Figures for the Various Boroughs, 1920-1921.

		Reported by Laboratory	Reported by Institutions	Reported by Physicians	Total
Manhattan	1920	1,034	717	462	2,203
	1921	1,031	1,474	827	3,332
The Bronx	1920	198	153	90	441
	1921	232	76	55	363
Brooklyn	1920	549	925	217	1,691
	1921	451	964	81	1,496
Queens	1920	78	43	29	150
	1921	43	25	9	77
Richmond	1920	37	8	5	50
	1921	10	6	3	19
CITY	1920	1,896	1,846	793	4,535
	1921	1,768	2,524	974	5,287

While the laboratory is the chief source from which cases of syphilis are reported, this is not true in the case of gonorrhoea. Physicians rarely resort to the Department's laboratory for the examination of smears from gonorrhoea cases. Physicians either examine them personally, or depend entirely upon the clinical findings.

Wassermann Clinics.

In all, 22,062 blood specimens for the complement-fixation test in cases of syphilis and gonorrhoea were taken in the Bureau's Wassermann Clinics, during 1921. This number was 272 more than for the year 1920. The increases are noted in Manhattan (972), and The Bronx (92), while Brooklyn shows a falling off of 792; leaving a net gain for the year of 272.

The Wassermann clinic work, outside of the boroughs of Manhattan and Brooklyn, is still very light. In The Bronx, with a population of more than 800 000, a total of 1,092 specimens were taken during the year. The other boroughs did no Wassermann clinic work at all. This activity needs to be a regular function in all the boroughs. As it is at present, residents of Queens and Richmond must of necessity travel long distances to other boroughs for the Wassermann test or miss its benefits entirely, if they cannot afford to pay for the test.

The quality of the work performed in the Wassermann clinics is uniformly good. Cupping to obtain blood was not necessary in a single instance during the last year in Manhattan clinic; although in Brooklyn this was found necessary on several occasions. That physicians value this service, is evident from the fact that 8,728 patients were referred to the Manhattan Clinic alone by them.

Analysis of Cases of Manhattan Advisory Clinic.

Total Visits	4,115
Males	3,505
Females	610

Analysis of Cases of Manhattan Advisory Clinic.

Single	3,081
Married	1,034
American Birth	1,906
Foreign Birth	2,209
Skilled	3,554
Unskilled	561
Unemployed	1,328
Infected by Public Prostitute	1,465
Infected by Clandestine Prostitute	419
Infected from Other Source	86
Syphilis	1,038
Gonorrhoea	901
Sex Neurosis	22
Other	2,154
Previously Treated by:	
Advertising Physician	12
Private Physician	881
Dispensary	813
Drug Store	18
Self Treatment	144
No Treatment	97
Referred to Physicians for Treatment	690
Referred to Institutions for Treatment	925
Revisited to Clinic	2,619
Referred by:	
Physicians	720
Newspaper Advertisements	228
Clinics	8
Signs (Wall)	828
Friends	2,230
Otherwise	101
Wassermann Tests	1,578
Gonorrhoea	2
Complement Fixation Tests:	
Double Tests	419
Dark Field Condenser Examinations	18

Venereal Disease Treatment Clinic—1921.

	Syphilis		Gonorrhoea		Chancroid		Totals	
	M.	F.	M.	F.	M.	F.	M.	F.
On Register, Jan. 1, 1921	125	42	31	6	0	0	156	48
New Cases	294	147	363	40	10	0	667	187
Old Cases Readmitted	14	98	52	5	0	0	296	103
Diagnosed "No Case"	15	4	2	0	0	0	17	4
Probably Cured	14	8	26	0	1	0	41	8
Referred to Physicians	32	4	63	9	0	0	95	13
Referred to Institutions	9	7	46	2	0	0	55	9
Discontinued	70	23	137	12	0	0	207	35
On Register, Dec. 31, 1921	80	63	85	12	1	0	166	75
Provisionally Discharged	397	137	34	3	0	0	431	140
Discontinued Without Permission	109	64	190	24	9	0	308	88

<i>Treatments.</i>				
	With Mercury	With Salvarsan	For Gonorrhoea	Total Treatments
New Treatments	240	114	385	739
Old Treatments	4,063	3,239	3,791	11,093

<i>Miscellaneous Data.</i>			
Total Cases	12 921	Dark Field Condenser Examinations Made	111
Total Revisits	12,067	Smears for Gonococci	1,859
Special Consultations	1,089	Complement Fixation Tests	1,211
Home Visits by Nurses ..	317	Spinal Punctures	33
Revisits by Nurses	617		
Not Found	67		

<i>Court Work.</i>		
Diagnosis	Male	Female
Syphilis	17	168
Gonorrhoea	5	496
Both	0	125
Chancroids	0	0
Negative	104	700
Totals	126	1,489

Total Cases Sent to Workhouse	608
Total Cases Voluntarily Committed to Department Hospitals	10
Total Cases Forcibly Removed to Department Hospitals	385

Advisory Service.

The advisory clinics of the Venereal Disease Division serve now, as since their inception, to counsel those who would otherwise fall victims to quacks and patent medicine vendors.

The total number of cases seen by medical advisors in the venereal disease service of the Bureau, in all boroughs, was 8,511. This is 2,095 more than in the year 1920. The cases were divided as follows:

Cases Seen by Medical Advisors in the Venereal Disease Service.

	New Consultations	Revisits	Total
Manhattan	4,115	2,619	6,734
Brooklyn	716	941	1,657
Bronx	120	...	120
Total	4,951	3,560	8,511

This activity shows an increase in all the boroughs, particularly in Manhattan, where the increase over last year was 1,575. The increase in Brooklyn was 124; in The Bronx, the service remained stationary. The increased activities of the medical advisory service is undoubtedly due to our free treatment service. This work is susceptible of further development, and it ought to be encouraged. Undoubtedly, this is one of the most important activities of the Venereal Disease Division. In this connection it would seem desirable to resume posting placards advertising this service, and to require the Department's lecturers to regularly mention this feature of work in all their lectures. The Occupational Clinic should form an excellent source of reference and of education in venereal diseases.

The Boroughs of Queens and Richmond have no advisory service. If a Wassermann clinic were established in the Borough of Queens, as it now can be because of our acquirement of an increased staff of doctors and nurses, the matter of giving

medical advisory service would be entrusted to the person doing the Wassermann work.

The quality of work performed in the medical advisory service of the Department is undoubtedly of a high order. This is due to the fact that our staff is well trained, and that facilities for doing good work are now at hand. In addition to their regular functions, these clinics continue to administer first-aid for a variety of accidents and minor ailments and, from time to time, administer various forms of immunizing treatment to those who are referred by physicians or institutions.

Treatment Clinics for Syphilis and Gonorrhoea.

The total number of visits made by patients to the treatment clinics were 46,786, divided into 33,916 in Manhattan; 11,631 in Brooklyn; and 1,239 in The Bronx.

Our treatment clinics have made excellent strides during the year as demonstrated by the accompanying table. Unemployment may be one of the reasons for this, but there can be no doubt that another important reason is the excellence of the work performed in the clinics. This applies both to Manhattan and to Brooklyn where such clinics are maintained. Without going into details, it may be stated that there has been a general improvement in the character of the work performed in the clinics. This is due, first, to the improved facilities; second, to increased staff; third, to the increased experience of the staff. The improvement is noted in history taking, diagnoses, examinations, and treatment.

The number of treatments given in both clinics total 16,814—divided as follows: Manhattan, 12,921; Brooklyn, 3,893. A total of 3,745 salvarsan injections were administered, of which 3,239 were given in the Manhattan clinic, 515 in Brooklyn; 7,260 mercury injections were given, of which 4,063 were administered in the Manhattan clinic; 3,197 in Brooklyn.

During the year, the Brooklyn Clinic admitted 158 new patients; in the same period, Manhattan admitted 854. The source of reference of our cases is rather interesting. In Manhattan, 449 of the total number were referred by our medical advisory service; 171 by private physicians, and 155 by clinics; 79 came to us from other agencies. The Manhattan Clinic examined 111 patients for spirochetes, by the dark field method, during the year. This is a considerable increase over the previous year.

The rule to treat only indigent cases was strictly adhered to and 108 cases attending our clinics were referred to their family physician, during the year, when it appeared that they were not suitable cases for free treatment.

Owing to the small attendance, the Brooklyn Venereal Disease Class for the treatment of gonorrhoea was discontinued during the year, syphilis treatment alone being given there, and the patients under treatment for gonorrhoea were transferred either to the Manhattan gonorrhoea clinic, or to outside Brooklyn venereal disease clinics. It is certain that there is need for a good gonorrhoea clinic in Brooklyn, but this can be done only if we have an additional staff and if we are prepared to properly advertise it.

The Boroughs of Bronx, Queens, and Richmond have no venereal disease treatment clinic. In the Borough of Bronx the clinic gives nominal treatment. In the Boroughs of Richmond and Queens, there is no venereal disease clinic of any type. It is, of course, certain that there are a number of people residing in these boroughs that need treatment, and who are too poor to pay for it. This, therefore, necessitates long journeys for some of them, or, entire neglect to take treatment.

Nurses' Visits: A total of 1,061 visits were made by the nursing staff of this Division during the year. Most of these visits were for investigation of the financial and social status of clinic patients, while a small percentage were for the investigation of complaints charging the existence of a menace to health. The number of

fictitious addresses was surprisingly small, only 67, or less than 6.1%. At least one visit was made to the homes of all of our clinic patients, and to delinquent cases as many as three or four.

Court Work: During the year, 1,616 arrested persons brought before the various courts were examined. Of this number, 127 were of the male sex, and 1,489 females. The percentage of males and females was about the same during the preceding year. The total number of arrested persons examined shows an increase of 138, for 1921. The percentage of diseased persons among the males was found to be 19, as against 54 among the females. These figures are somewhat higher than last year. This is undoubtedly accounted for by the fact that the Department now takes stricter account of clinical evidence of venereal disease. It is noteworthy that very few clinical cases of syphilis without laboratory confirmation were found, namely, 7 out of a total of 1,489 examinations.

No fixed hospital provisions exist for the detention of the 23 male patients that were found to be diseased, in 1921. A certain number of them were sent to a penal institution and received treatment there; but those released were entirely lost for purposes of control. We should have definite hospital provisions made for the reception and treatment of male cases, exactly as we have for females.

The quality of the work performed in the Jefferson Court Clinic is quite good.

The practice instituted during the year of detaining arrested cases prior to trial, at the Workhouse, has occasioned numerous delays in the examination of these individuals. Although the Workhouse authorities are doing their best to deliver the cases to us on time, there are frequent delays, for one reason or another, of from one-half to one hour. It would, of course, be better from our standpoint, if these cases were again detained, as formerly, in the Jefferson Market Prison.

In this work, our relations with the magistrates has been most cordial. They have given us their entire co-operation.

Our agreement with the Workhouse authorities as to the treatment of committed persons has now been in force for more than a year. The present plan calls for improvement at various points. Under our limitations of staff we cannot supervise the treatment more closely than we do. This applies with even greater force to other institutions to which cases are occasionally sent. Fortunately, by arrangement with the courts, few cases that need active treatment are sent to outside institutions.

Detention and Release of Court Cases: During last year, not a single case that was removed by this Bureau to the Kingston Avenue Hospital was released into the hands of private physicians. The arrangement whereby probation cases waived the privilege of private treatment is working out satisfactorily.

A feature of our treatment work that is important and needs further development is in connection with cases released from Kingston Avenue Hospital. While it has been our aim to induce released cases to continue treatment outside of the hospital, the response has been rather poor. This, of course, is due particularly to the fact that we are dealing with an irresponsible class of individuals, but suitable arrangements could be effected by a co-operative arrangement with the New York Probation Society. These remarks apply with equal force to discharged Workhouse cases. In these cases, our difficulty will be greater because of the fact that the courts no longer have a legal hold on them.

Hospitals for Venereal Diseases: In all, 435 patients were sent to the Kingston Avenue Hospital during the year. Of these, 292 had gonorrhoea, 82 had syphilis, 55 syphilis and gonorrhoea, and 66 were non-venereal. The majority of cases, 397, came from the Jefferson Market Court; 4 were referred by the Brooklyn Night Court; 3

from the Wayside House. Only 19 were voluntary admissions. The number of voluntary admissions is exceedingly small. It is desirable to increase the number of these, and occasion should be taken to make known our readiness to accept infectious venereal disease cases. This can be done by circular letter to social service organizations, and to the various hospitals in the City. Separate accommodations in the hospital should be provided for such cases, so as to keep those who have no delinquency record separate from those who have such a record.

A total of 385 patients in the hospital were discharged according to our routine method. It was found necessary to expel 19 patients. These were returned to the courts on charges of misconduct, and sent to various penal institutions. Four patients escaped during the year, a much smaller number than during the previous year. We are glad to report that no deaths occurred in the service during the year, though there were a number of major operations.

More than 1,000 Salvarsan injections were administered, and 1,475 mercury injections given. A total of 28 operations of various kinds were performed, a number of these being laparotomies. During the year, two classes, one for vocational training and the other where the three Rs are taught, were established. Attendance was voluntary. It is gratifying to report that more than 90% of our patients attended these classes regularly. They render a most important service; first, from the educational standpoint, and secondly, from a disciplinary and reconstructive point. Unfortunately, when the cases are discharged from the hospital, all educational, reconstructive and rehabilitating care ceases. Here would be an excellent field for the service of a suitable social service agency.

The legal measures for the detention of our cases seem to be working out satisfactorily. Fewer cases than last year have sought release through habeas corpus proceedings; none have been successful.

Complaints: A total of 62 complaints were received and investigated during the year; 57 were from citizens, and 5 were referred to us by private physicians. Visits were made by the nursing and medical staff, depending upon the nature of the complaint. As a rule, little difficulty is experienced with these cases. Those requiring it have been induced to take treatment without forcible measures.

Follow-up of Venereal Disease Cases: Early in the year, owing to a misunderstanding of our policy in connection with follow-up of venereal disease cases that were delinquent in clinic attendance, we received from various clinics in the City large numbers of requests for follow-up of cases who had ceased attendance at such clinics. They were, for the most part, non-infectious venereal disease cases. In order to correct this a circular letter was prepared and sent out to the various agencies in the City, with the result that there has been a great improvement in this direction. They no longer request us to make visits to cases that are non-infectious. We, of course, continue as heretofore, to visit actively infectious delinquent cases that are brought to our attention.

SUMMARY OF VITAL STATISTICS FOR THE MONTH OF AUGUST, 1922.

The health of the city was exceptionally good during the month of August, judging from the decreased mortality in most of the prominent causes of death. There were 4,648 deaths reported from all causes during the month as compared with an average of 5,476 deaths in the corresponding months of the immediately preceding five years, a decrease of 828 deaths. The most satisfactory decrease noted among the individual causes of death was that of the diarrhoeal diseases under five years of age, there having been only 273 deaths reported from these causes during the entire month as compared with the quinquennial average of 673, a decrease of 400 deaths. This was all the more remarkable as the temperature and humidity conditions prevailing during the month were approximately normal.