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# Hepatitis Study Under Way at Willowbrook School

(Last of four articles)

By LEONARD NOVAKRO

Out of an average of 525 units of blood transfused on Staten Island every month, it is estimated that at least 2 are contaminated.

Where a p proximately 175 standard part of surgery. Some patients, during the same where along the line, the virus period, require transfusion, one of every 70 stands a good chance of contracting a disease, through a long incubation process.

The largest obstacle to ending this startling reality is the evasiveness of hepatitis, the most common of diseases transmitted through transfusion.

Instances of the disease were first noted among the military shortly after World War I. However, it wasn't until World War II that hepatitis had an upsurge in this country.

Hepatitis most commonly showed its face in the Far East, New Guinea, the Philippines and a variety of tropical islands. It was one of the many things brought home after the war. The infection is spread by fecal contamination, by contact with a virus carrier's waste product, and has been traced to food and water contaminated with germs from human wastes.

About the same time the disease began to spread, blood transfusions began to become a liver function, which is a sure sign one is harboring the virus.

However, unless the virus is isolated, the threat against 100 per cent successful transfusion process is constant.

Dr. W. d'Arcy Maycock of England, who has conducted extensive surveys into the relationship of serum hepatitis to blood transfusion, noted: "Until laboratory techniques for detecting and culturing the virus are generally available, the effectiveness of new methods of sterilization will have to be assessed by the less satisfactory and tedious method of following up patients six months after they have been treated with materials so sterilized, and progress is likely to be slow and certain."

A follow-up program would be highly impractical in a city like New York, where there are approximately 1,000 transmitters daily.

At Willowbrook State School, which experiences an average of six to eight cases of infectious hepatitis a month, extensive studies into the control of the evasive virus have been going on since 1936.

The low incidence of the disease within the heavily populated state institution is largely due to the direction of Dr. Joan Giles, associate professor of pediatrics of New York University School of Medicine.

As resident pediatrician at Willowbrook, she maintains a screening program on every new admission. "We take blood from every new patient and can tell whether a person is immune or susceptible to almost any disease that can be tested," she explained.

The assumption is that if a patient has built up enough antibodies to make him immune to a disease, he has had previous contact with it. Antibodies also have undergone study and research at Willowbrook.

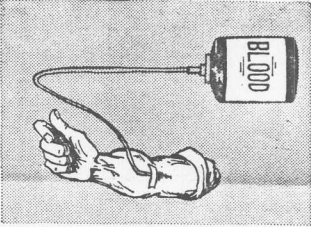
A hepatitis carrier who donates blood, because of his exposure to the virus, has also built up a supply of antibodies capable of warding off the disease.

These preventive agents may also be transmitted through transfusion, along with the virus. Studies into the effectiveness of such antibodies utilized in transfusion is turning up more evidence in its favor.

Every new Willowbrook employee is injected with gamma globulin, which has been found to have a protective capacity against hepatitis for five months. If a person is exposed to the virus within that period, come such a great danger, he will have the time to build up antibodies to ward off any future attack.

Specimens are collected from patients in efforts to discover an effective method of isolating the virus and eventually developing a vaccine against it.

The studies being conducted at the institution are supported by a number of Armed Forces grants made through New York University.



numerous institutions and hospitals throughout the country, in hopes of guaranteeing a purely effective life-saving process. "The key to the solution of the problem is isolation," said Dr. Giles. "Chances are it will happen faster than it did with polio, because the pace of medical discovery is faster today than it was then."

But for the hundreds of wounded in Viet Nam, there can be no such concern. Tomorrow or five years from now, various Armed Forces grants available to happen fast enough.

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