PSEUDO-SCHICK VERSUS MOLONEY TEST.

In the previous section the 4,342 school and pre-school children were Moloney tested at the same time for the purpose of eliminating reactors who would be upset by the anatoxin. The Moloney test is best read at forty-eight hours, the Schick test at seventy-two hours or later. The pseudo-Schick seemingly can be used instead of the Moloney, the heated Schick toxin employed as a control throwing a certain proportion of pseudo-reactions. These pseudo-reactions seem equally efficacions in determining those who are sensitive to the injection material.

The heated Schick toxin was employed as a control, the Moloney test not being used, in 931 children. There were 172 pseudo-positive and 126 pesudo-negative reactions, a total of 298 showing this type of sensitivity, or 32 per cent., mostly mild with some few severe, the latter being eliminated.

In addition to the children already mentioned, there were 500 who received only the Moloney test. There were 20 severe reactions, and 251 mild ones, a total of 271, or 54·2 per cent. severe reactors were eliminated.

These two groups of 931 and 500 children were given the protective anatoxin injections. There seems to be little advantage in the newer Moloney test over the older pseudo-control as a guide to reactors. After eliminating in both groups all severe reactions at testing-time, after the injections were given, 3.4 per cent had general constitutional upsets in the Moloney group, as against 3.1 per cent. in the Schick-control group.

MOLONEY TEST ALONE INADVISABLE.

It is frequently stated that in mass immunization campaigns the Schick test may be dispensed with, and injections given after the Moloney or other form of "detector" dose has been employed. Those who hold this view give themselves more work in the long run, and also give to a considerable proportion of naturally immune children quite unnecessary injections of potent material. Results so far establish conclusively that the Moloney positive reactor is not necessarily Schick negative, and the former test cannot replace the latter. The Schick test is simple, easy, and accurate, and in the present campaign has already saved us very considerable work. By using the Schick test 1,154 have already been eliminated as naturally immune; (6.6 per cent. of the pre-school group and 27.2 per cent. of the school group). Over three thousand injections have been avoided. This means a large saving financially, while there is the personal satisfaction of knowing that unnecessary injections are avoided and one's time is being economized.

CAMPAIGN RESULTS TO PRESENT DATE.

Not all the children who submit to preliminary testing proceed to immunization, as parents change their minds, either then or after first or second doses. Absence from school or change of locality accounts for further incomplete immunizations. Nevertheless, the majority see the full course through.

To the present date 420 pre-school children have been dealt with, 86 receiving one injection, 188

two injections, and 146 three injections of anatoxin.

Of school-children, 4,972 obtained parental consent, 274 only of these missing the preliminary testing by Schick and Moloney tests. In the schools from which these children came there were 9,971 scholars attending. The campaign so far has handled 49.8 per cent. of the available school population, almost half.

Anatoxin has been given to 3,393 school-children, 286 receiving one injection, 474 two injections. and 2,633 the full course of three injections. During 1938 Schick tests will be made on these children

to ascertain the immunity gained, a further report being made in due course.

Approximate Cost of Paper.—Preparation, not given; printing (1,225 copies, including maps and graphs), £162 16s.