



Tent Treatment and Beyond



By Irma West, MD

WHEN THE COUNTRY DOCTOR WAS CALLED to see my 12-year-old mother at my grandparent's dairy farm in Ontario, Canada, the news was not good. The diagnosis was consumption and her only chance of survival was to stay in a tent in the back yard at complete bed rest.

She and my grandmother occupied the tent for over two years through the worst of Canadian winters, surviving whooping cough, measles and tuberculosis. The probable source of my mother's infection was her aunt who stayed at the farm hoping the fresh air would improve her poor health.

This experience with tuberculosis was not my mother's last. When her oldest daughter was a toddler she suddenly became semi-comatose and died about a month later. No diagnosis was reached until my physician-uncle arrived from California. He recognized tuberculous meningitis and investigated the family's milk supply which the authorities found to be unpasteurized and contaminated. I was not affected because my mother was nursing me. It was ironic that my now retired grandparents were among the first to test dairy cows for tuberculosis and pasteurize their milk in accordance with the bulletins from the Agricultural College at Guelph, Ontario.

When I was about 7 years, the lymph nodes in my neck became chronically enlarged. Flannel wraps with coal tar ointment were prescribed. I had what was known then as scrofula, a form of tuberculosis. Fortunately for me, the nodes cleared leaving me with a very positive Mantoux (skin) test.

This apparent resistance to tuberculosis was an asset as a medical student when almost one third of the preceding class became ill with tuberculosis. The source was post mortems on bodies not known beforehand to be infected, which the students, including me, observed at close range.

Incidentally, 14 years ago my mother died at 97 years following an accident.

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