

HEALTH SERVICE AT PURDUE UNIVERSITY.

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In University work as in Industrial work it has been recognized for a long time that health is of absolute fundamental importance. In 1912 there was established at Purdue University what is known as a Medical and Infirmary Service. The primary object of this was the prevention of disease, especially of the contagious group. Other less important objects were the first aid and subsequent treatment of injuries received in the performance of University duties. Also the examination of any student who considered himself unfit for University duties, especially athletic or military. Still another object was to provide the student with some financial aid in case hospital care became necessary. The rules established in 1912 for governing the working of this service were simple. That they have been satisfactory is evident because they have remained practically unchanged during the past eight years. The rules governing this service are as follows:

"In order to encourage students to exercise greater care in the preservation of their health and prevention of disease, the University authorities have organized a Medical and Infirmary Service which provides for each student the opportunity for free consultation with a competent medical adviser, and, when necessary, for reception at either of the hospitals at Lafayette for a limited time, free of charge.

"The regulations governing this service are as follows:

1. Fee.—Each resident student is required to pay annually at the time of registration a medical and infirmary fee of \$1.00.

2. Consultation.—The University physician will be in his office at Stanley Coulter Hall at regular hours daily for consultation on matters of health by any student, free of charge.

3. Hospital Service.—With the approval of the University Physician, any student in good standing may be received in the St. Elizabeth Hospital or the Home Hospital of Lafayette during the academic year, and the necessary hospital charges will be defrayed by the University to an extent not to exceed \$1.50 per day and for a time not to exceed seven days.

4. Contagious Disease.—Following an absence from the University due to contagious disease a certificate of health must be obtained from the University Physician before re-entrance.

5. First Aid.—In accidents or emergencies occurring on the campus in connection with University duties first aid will be administered by the University physician without charge.

6. Exceptions.—Medical attendance at the homes of students or at the hospitals; drugs and medicines; treatment of injuries received in physical exercises and contests; and treatment of certain specific and chronic diseases are not included in the above privileges.

7. Nothing in the above is to be construed as interfering with the right of any student to employ the services of any physician in a private capacity, but if in so doing he wishes to avail himself of the hospital privilege as above provided, the approval of the University physician is necessary."

In addition to what the above rules specify, the Department of Pharmacy has undertaken the task of filling, free of charge, the prescriptions written for the students by the University physician. This is for the purpose of giving the students in Pharmacy some practical experience in filling prescriptions. This work is, of course, done under the careful supervision of an experienced Pharmacist.

Some points in the above rules need some explanation. It will be noted in rule 1 that all resident *students* are required to pay the fee, which means that the instructional staff and other employees of the University are not entitled to the service. In regard to rule 2, it will be seen that the University physician is not required to give treatments. This applies especially to treatments requiring the training of a specialist, for example, eye, ear, nose and throat work and genito-urinary work. However, in these cases, advice is given as to where proper treatment may be received. In regard to rules 3 and 7, it has been found by practical experience that it is better that the hospitals notify the University physician daily of the admission of students for the past twenty-four hours. The allowance of \$1.50 per day covers the necessary expenses in a private ward. If any student desires more expensive surroundings he may have them at his own expense. Rules 4 and 5 are self-explanatory. It will be noted in rule 6 that the care of injuries due to athletics, whether they be caused by inter-collegiate or inter-class games, is not a part of the University physician's duties. Such injuries are taken care of by the Athletic Association which has a surgeon of its own, and whose duties bear no relationship to those of the University physician. The last part of rule 6 is in reference to such chronic conditions as tuberculosis and chronic heart and kidney troubles, and especially to venereal diseases. Of course, we know that these latter exist, but it has never been felt that the University life was endangered by them.

The medical adviser in this organization is a licensed physician, who devotes an average of three hours a day to the dispensary work, in addition to which he exercises supervision over the admissions to the hospitals. The variety of the experiences given in the dispensary may be seen in the appended list of diseases, which also includes the number of times those diseases appeared for diagnosis.

It is, of course, impossible to make any more than an estimate of the value of this health service to the student body. It certainly would seem to be worth considerably more than its cost to the students. During 1909, 1910 and 1911 the average number of students in the hospitals during the school years averaged about 75. During 1912, 1913 and 1914 the average number dropped to below 60, even with a slightly greater attendance at the University. Since this time the hospital attendance increased to 185 during the last school year, 1919 and 1920. This increased number is due to three factors. First, that the attendance at the University was 75 per cent greater than in 1910. Second, to the fact that the students took greater advantage of the opportunity afforded for hospital treatment, and, third, to the epidemic of influenza. The second fact is attributed in part to the experiences of the students with medical and hospital work during the war.

During last year there were only three deaths among the resident students, two following mastoiditis and one appendicitis. Our experience with contagious diseases has been very satisfactory. Last year there were:

scarlet fever five cases, small pox 4 cases, diphtheria 2 cases, chicken pox 1 case, mumps 25 cases, and measles 2 cases. This list, of course, does not include the relatively enormous number of cases of bronchitis, coryza and grip which some called influenza. That the student body availed itself of the advantages of the dispensary service is indicated by the fact that of the 2,730 students, who were eligible to the service, 1,249 took advantage of it. These 1,249 presented themselves to the office of the University physician 1,980 different times with (for them) different illnesses. For some of these illnesses many calls at the office were necessary so that the total number of office consultations or treatments, given by the University physician during the school year, was probably in excess of 5,000. The number of prescriptions filled by the Pharmacy Department was 3,600. In addition to the above figures 1,100 excuses were written for the Military Department.

List of diseases, with the number of times they occurred, which were diagnosed and given a varying number of treatments in the office of the University physician, Purdue University, during the school year, 1919-1920.

BLOOD—CIRCULATION—DUCTLESS GLANDS.

Anaemia—1	Varicocele—1
Hypertrophy of Heart—1	Lymphadenitis—13
Mitral Regurgitation—5	Lymphangitis—1
Myocarditis—1	Goitre (simple)—1
Tachycardia—4	Hyperthyroidism—1
Faint—1	

CUTANEOUS.

Chilblain—2	Pediculosis—2
Frost Bite—1	Scabies—2
Tinea Circinata—6	Seborrhea—1
Tinea Cruris—45	Dandruff—1
Tinea Psycosis—6	Impacted Cerumen—2
Wound (Abraded)—13	Otitis Externa—1
Wound (Puncture)—2	Hyperhydrosis—1
Wound (Lacerated)—19	Urticaria—16
Wound (Infected)—75	Eczema—22
Impetigo Contagiosa—2	Psoriasis—5
Paronychia—7	Clavus—2
Burn—6	Pruritis—3
Boil—31	Rhus Poisoning—12
Stye—2	Sumach Poisoning—1
Furunculosis—13	Verruca—9
Acne Vulgaris—16	Vaccination—3
Ingrown Toenail—2	

DIGESTION.

Stomatitis—3
 Gingivitis—1
 Hyperplasia of Gum over
 Wisdom Tooth—10
 Calculus in and Infection of
 Wharton's Duct—1
 Mumps—25
 Herpes Labialis—4
 Hyperchlorhydria—5
 Indigestion—28
 Gastritis—8
 Enteritis—6
 Gastro-Enteritis—1

Appendicitis—1
 Colitis—13
 Intestinal Toxaemia—5
 Ptomaine Poisoning—2
 Rectal Fistula—1
 Constipation—50
 Biliousness—4
 Flatulency—3
 Diarrhoea—21
 Hemorrhoid—7
 Taenia Saginata—1
 Oxyuris Vermicularis—1

RESPIRATION.

La Grippe—167
 Bronchitis—453
 Epistaxis—3
 Ulcer on Nasal Septum—1
 Frontal Sinusitis—13
 Coryza—142
 Pharyngitis—265
 Laryngitis—12

Tonsilitis—120
 Broncho Pneumonia—1
 Influenza—1
 Asthma—2
 Pleurisy—4
 Incipient Tuberculosis—1
 Arrested Tuberculosis—1

OSSEOUS—ARTICULAR—MUSCULAR.

Rheumatism (Articular)—6
 Rheumatism (Muscular)—15
 Myalgia—17
 Myositis—5
 Hernia—2
 Sprain—15

Broken Arch—3
 Sacro Iliac Joint (Movable)—1
 Exostosis—2
 Tendo Synovitis—1
 Infection Alveolar Process—1

SYSTEMIC.

Scarlet Fever—1
 Small Pox—1
 Chicken Pox—1
 Measles—2
 Liberty Measles—1

Herpes Zoster—7
 Gout—1
 Lead Colic—1
 Abscess—5

NERVOUS.

Concussion of Brain—2
 Headache—22
 Neuralgia—8
 Neurasthenia—1
 Epilepsy—1

Insomnia—1
 Paralysis—3
 Hysteria—1
 Neurosis—4
 Hiccoughs—1

RECEPTOR.

Eye Strain—9	Eustachitis—1
Foreign Body in Eye—13	Otitis Media—4
Conjunctivitis—40	

GENITO—URINARY.

Dysmenorrhoea—1	Phimosis—5
Endometritis—1	Acute Nephritis—2
Orchitis—2	Cystitis—1
Vesiculitis—2	Polyuria—3

