

"If winter comes, can spring be far behind?" Spring is always welcome on the campus, but this year winter is bringing another, strange guest. The Infirmary is hurrying to meet . . .

The Uninvited

THE INFIRMARY'S business office was busy indeed.

One by one, purchase orders were rolled into a typewriter, addressed, filled in, yanked out and stuffed into envelopes for mailing. It took some time, but when the job was finished and the personnel checked the lot they found, yes, an order had been placed with every pharmaceutical firm in the nation known to be manufacturing a particular, needed vaccine.

The University's Ellison Infirmary was expecting a guest, come cold weather. The guest had not been invited to the campus, but arrival was inevitable.

Asian Flu, moving off the continent which bears its name, already had invaded South America, seeped into North America, and was waiting for winter winds to carry it north en masse. Communities, of course, will be its chosen grounds, and the University is a community in practically every way except name.

So the University was bracing itself.

Dr. James O. Hood, director of the Student Health Service, discussed this newest angle to his job the other day.

"We've no idea at all how much vaccine we'll be able to get, or how soon," he said. "All the recent publicity in newspapers on availability of vaccine, we've taken with a grain of salt. We do realize that we'll have trouble getting as much as we need until production is stepped up.

"For that matter," he said, "I've no idea just how many persons at the University will want vaccine. A lot may not consider the Flu serious enough to bother with taking a shot."

Can the University expect an outbreak of the Flu?

"Definitely," said Hood. "Why, we're even more likely to have an outbreak than the normal community. Students come here from many states and countries.

Some bring infections with them, acting as carriers. Respiratory diseases—like flu—are most likely to occur here, and they spread fast. Most universities of this size would be exceedingly lucky not to have an outbreak."

Hood and his associates have no definite setup as yet concerning the method of vaccine distribution when it arrives. They talked about the possibility of priorities of sorts, but the Student Health Service at Oklahoma is different from those at most other universities—it was created to serve students only. Since no one group of students is more essential or susceptible than others, it seems likely that a first-come, first-served basis will determine vaccinations against Asian Flu.

"However," said Hood, "we just might vaccinate infirmary personnel and food handlers first, in order to protect the students."

If a large outbreak happens on the campus, then the Health Service may have to ask for help in handling it. There are only 35 beds in the Infirmary.

"We have had up to 100 patients in the building in the past," said Hood, "but that was nine or ten years ago, before we converted part of our second floor into office space. We couldn't handle that many now. If an outbreak comes and is large, we'll have to depend on keeping some patients in dormitories.

"The Service has been authorized additional personnel, but hasn't been able to get them as yet. We hope to have another doctor here soon. If many get sick we'll be short on nurses."

Talk of this sort—a new strain of flu entering the country—might, at first, tend to panic some, and already a number of newspapers and magazines have shouted the Flu's approach in overlarge headlines. However, Hood and other doctors know



DR. JAMES O. HOOD

We would be very lucky to escape an outbreak.

that the Asian disease will be no match for the Spanish Flu, which hit the country in 1918.

The new Asian variety popped up first in Hong Kong, off the coast of China. Americans first heard of it in April, and for the moment it seemed merely another far-away epidemic, nothing to worry about.

Then it began to move. One tentacle reached roughly east to touch Japan, and kept going. Another headed roughly west, to India. Millions became sick in the Far East and Middle East before it reached South America, and hundreds of thousands fell ill in the latter area.

About 25,000 cases appeared in the United States. People began to remember the Spanish Flu which accompanied the end of World War I, put 20 million persons flat on their backs and killed more than 800,000 of them.

The Spanish Flu did not kill alone, however. It weakened the individual, then transferred other diseases which it had carried as companions.

Thus far, some doctors have stated that they can see no pneumonia, streptococcus or other sickness accompanying the Asian Flu. The Flu is mild compared to its Spanish predecessor. People will be sick, but the danger will be less; we've antibiotics now which didn't exist 40 years ago.

Nevertheless, many people will begin to feel bad when December or January

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zone"—where it was so warm that the natives needed but little of clothing or shelter, and when they were hungry all they had to do was to reach up and pull off a few bananas—still produces a feeling of longing in me.

Yes, 1907 was a year of trouble for the University. With the coming of statehood, the University was placed under a new governing board. Some of its most serious troubles did not materialize until June, 1908, when the new governing board summarily removed President Boyd who, as president of the University for 16 years, had accomplished a most excellent record.

Twenty-two others were also removed including some of the strongest men on the faculty, such as Dr. Vernon L. Parrington, professor of English, who was grabbed up by the University of Washington where he won many honors; Dr. Lawrence W. Cole, professor of philosophy and psychology (my major professor), and Dean Washburn of the Pharmacy School, who were called to the University of Colorado where they served with honor till retirement; and Professor Humphries of the English Department who went to the University of Michigan.

Dean Washburn was a tall man for those days, slender, with long arms and powerful hands. He told me he met Ty Cobb in Chicago, and when he shook hands with him, Cobb raised Washburn's hand and said: "What do you do for a living?" Washburn told him he taught pharmacy. Ty Cobb said: "A \$100,000 hand gone to waste!"

Washburn used to pitch baseball to me. I would stand in front of a barn and he would burn them in. With my catcher's glove I would do the best I could. Some I could not reach; some I could not hold.

Dr. Boyd did many fine things for the University. He insisted on high standards of scholarship and of conduct from faculty and students. One of the finest things he did was to have large numbers of elm trees planted on the campus and on the University Boulevard. This boulevard at that time was a two-lane, unpaved street, with a row of elm trees down the middle and a row on each side. There was a wood sidewalk only on the west side. Later on, when the boulevard was paved, the cost of paving two lanes was deemed prohibitive by the property owners, so the middle row of trees was taken out and one lane of paving laid.

Dr. Boyd's elm trees today are large, well cared for, and are a source of beauty and satisfaction. In your picture they look quite small, but you can be sure that even though small, they were a welcome sight on what was otherwise a somewhat barren prairie.

Enough of dreaming! From a small and modest beginning a great University has arisen. It can well be proud of its fine name. Its great presidents, its devoted faculty of capable and forward-looking men and women, have made it an institution of which the state of Oklahoma can well be proud.

I am glad to join with its students, past and present, in saying: "Hail! Alma Mater!"

Sincerely yours,
ERRETT R. NEWBY

THE UNINVITED

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comes—probably around 30 million of them.

Dr. Hood's staff is used to treating 20,000 patients per semester, most of whom are ailing with respiratory diseases.

One event which the staff isn't going to forget came last winter. Scores of students at Cross Center suddenly developed the stomach ache, nausea, headaches. At first food poisoning was suspect. Then, as students poured into the Infirmary, it became apparent that they had been struck by a "lightning" virus, which passed in a matter of hours. Though not really serious, it constituted an emergency at the time, and the Infirmary took care of them.

Virus epidemics are relatively small and are likely to occur often. Flu epidemics are worldwide and can be expected about every quarter-century.

The Asian Flu has struck hardest at small children to this point, but who it will strike in the future is impossible to determine. You may have it when you begin to ache and cough, feel listless, run a temperature, have a sore throat and headaches. Taking care of one's self—i.e., not missing meals or exerting one's self too strenuously—is the best defense. A warm bed and liquids are the best retreat methods, and relapses must be avoided; otherwise, dangerous complications could be brought on.

When O. U. students begin to feel the symptoms this winter, the Student Health Service will be ready to go into action and give them all the help it can.

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