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## Adventitia

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### Every dogma has its day

When I went to Baltimore, Maryland, in 1958, to supplement my meagre salary I worked in the Baltimore city health department tuberculosis clinics. At that time, depending on their colour, those who developed tuberculosis were confined to one or other of two monolithic goals. If they were lucky they would emerge after some mutilative surgical procedure two or three years later. Refusal to undergo treatment resulted in a court order and almost certain confinement. When the owner of the premier Chinese restaurant in Baltimore developed tuberculosis one of the more important issues before the city council was to decide whether he would be admitted to the black or the white sanatorium. As a successful entrepreneur, he received special dispensation and was admitted to the white facility.

About that time the British and Indian Medical Research Councils published the results of the Madras study showing that tuberculosis could be treated as effectively at home as in hospital, and that once chemotherapy had been started, and despite persistently positive sputum, the patient lost his infectiousness within a few days. The study was dismissed with scorn by most of the tuberculosis establishment in the United States. It was about that time that I had the good fortune to come into contact with Dr Richard Riley, who at that time was head of the department of environmental medicine at the Johns Hopkins Medical School. His name was known to me as the originator of the method for measuring the diffusing capacity

for oxygen and for his seminal work on ventilation-perfusion relationships while he was at Bellevue Hospital. A self effacing and modest man, Dick Riley, in the opinion of many, had been the major driving force in the laboratory of Cournand and Richards. He had a tremendous and justified reputation as a respiratory physiologist, but few at that time knew that he had been working for several years with the late Professor Wells on the infectiousness of tuberculosis and had been conducting a series of most ingenious experiments at Loch Raven Veterans Administration Hospital. The ventilation system there had been modified so that air could be extracted from a series of single wards in which were housed patients with tuberculosis, some of whom were undergoing treatment while others had not yet started treatment. In a few rooms patients with acquired drug resistance were housed. The extracted air was carried by a series of vents to several chambers containing guinea pigs and then vented to the outside. These studies showed irrevocably the lack of infectiousness of patients once they had started chemotherapy, the sterilising effect of ultraviolet light on droplet nuclei containing tubercle bacilli, and much else besides. Few contemporary physicians realised the contribution Dick Riley made to the termination of the gaol sentences that were part and parcel of the treatment in Maryland and elsewhere in the United States, and still fewer were aware that he himself had been successfully treated for tuberculosis.

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