

FILE

Citizens Pay Dearly For Failure To Wipe Out TB

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Tuberculosis is being pampered in Champaign County today as though it were a luxury to have around instead of a menace.

Never has so much been spent here on a disease that is entirely curable and should have been eradicated from the area years ago.

Unlike cancer, the villain of tuberculosis was identified a long time ago so that doctors today know how to diagnose the

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disease in its early stages, have adequate drugs and surgical skills to treat it effectively, and even more important, know how to prevent it from spreading.

Despite all this know-how Champaign County is still tolerating the disease at the rate of 20 new cases per year, and is paying a high price of \$127,000 annually for the sole purpose of fighting it on a defensive basis.

For all of 39 years now, Champaign County had had its own Sanatorium, located on N. Cunningham in Urbana, to provide free isolation care for area residents actively infected with TB.

According to state law (Gleason Act, 1915) each county in Illinois must provide free TB care for its residents if the tax was approved through a referendum. While a periodic approval of the tax was required at a general election every 10 years until recently, the tax commitment is now more or less permanent.

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Until 1946 only Champaign



News-Gazette Photo by Curt Seaman

TB INFORMATION, Mrs. Edna Alexander, left, executive secretary of the Champaign County TB Assn., helps a clerk mail out booklets and pamphlets on tuberculosis control to local residents. The Assn. was supported through Christmas seals this year by over \$27,000, with much of that amount being used to operate a Chest Clinic six days a week throughout the year.

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Until 1946 only Champaign County residents were eligible for admission to the Sanatorium but because there were not enough local residents to make adequate use of the 50-bed hospital, in recent years non-resident patients have made up a growing majority of the patients.

Last year there were 16 non-resident patients to 19 resident patients.

It must be noted though, that since the institution is supported by Champaign County, the major expenses are borne by county taxpayers. In 1960, for example, Champaign County residents paid \$90,000 in taxes for their share of the budget expenses, while out-of-county patients had to contribute only about \$30,000.

And, of course, there is another way besides the taxes in which all county residents are asked every year to contribute towards TB control: the purchase of Christmas Seals.

Certainly one of the best supported fund-raising campaigns in Champaign County for fighting a disease, the Seal sale, contributions this year amounted to over \$27,000.

Although \$5,470 of that amount goes to the state and national TB Associations, more than \$21,500 remains to cover the expenses of the Chest Clin-



New-Gazette Photo by Curt Reamer

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Between the seals contributions and the tax assessment, the county residents are now paying \$117,000 annually towards tuberculosis control.

The \$117,000 question is this: does the county have an adequate TB-fighting program to justify the expenditure?

The answer lies, not in the value of the present program, but in the extent of it. Champaign County has the weapons to fight the disease with, but the war against tuberculosis cannot be won unless the enemy is met openly with an offensive campaign.

Of what value is a year-round Chest Clinic, for example, if only a small percentage of the population uses its facilities? Is it really worth the great expenditure to X-ray only 8,000 persons in a year, while the germs freely lurk about in unknown quantity among 50,000 or more unchecked people of the community?

A thorough campaign eradicated TB from cattle years ago because agricultural authorities followed through with a firm program that did not permit hit-and-miss case finding or prevention. Is it not ironical that the disease lingers on in man, that his health is less sacred than the cow's?

The tuberculosis germ is spread from one man to another, so that as long as anyone actively infected is able to remain at large in the community indefinitely before being diagnosed and treated, the disease will continue to thrive and be a public health menace.

Diseases such as small-pox, scarlet fever and typhoid were eliminated as a public health threat only because general compulsion is a necessary step in providing immunization protection for the individual.

Tuberculosis demands a different kind of safeguard since there are no widely accepted vaccinations against it for man. The only real protection for the public against TB is to completely control the disease within each community, and maintain a program of constant checking to insure that re-activated cases are isolated and that persons moving into the area are free of the disease.

Of 21 new cases admitted from Champaign County in 1960 to the TB Sanatorium in Urbana, more than 50 per cent were persons in whom the infection was advanced.

This is not a comforting note for the public, for it signifies that at least 10 tuberculosis persons had a much longer period than they might have had to spread the germs to persons within their association. And, the sicker the patient, the long-

er hospitalization he will likely require, thus creating a greater burden for the taxpayers.

Among the 21 new cases in Champaign County last year were 15 men and five women, ranging in age from 28 to 75. Six of those persons were 69 years old or over; two were in their 50s; one in the 40s; and 12 were under 40.

Dr. A. T. Cole, director of the county san since 1938, said there is a trend at present towards younger persons being actively infected, as compared to an average age of 50 during the past decade.

He attributes this change in age of new patients to the fact that many young people who were in contact with TB in their youth are now just beginning

to have an activation of disease.

Citing an example, Dr. Cole said one of his patients is a young man from Champaign County who was originally hospitalized in Urbana who was originally exposed to a tubercular uncle of the age of three.

Actually great strides have been made in drastically reducing the death and case rate of tuberculosis in this country. Champaign County, for example, there were 90.3 deaths from TB per 100,000 population in 1920, while last year it has been reduced to .8 per 100,000 population.

However, with an average of 20 new cases still being discovered annually in this county there should be public concern over the problem, for it consumes human and financial resources that well might be channeled into other medical areas where the disease control is not known.

(NEXT: Possibly 2,000 persons in Champaign County infected).