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Subject: Standardization of Wassermann Test.

First Meeting held Feb. 19 in State House. The following laboratories representing private, municipal and health laboratories including our own, sent representatives. These laboratories perform approximately 100,000 tests per year.

The laboratories represented are:

Mass. General Hospital Dr. J. E. Wright
Peter Bent Brigham Hos. . . . Dr. E. C. Walker
Homeopathic Hospital Dr. W. J. Watters
Boston Board of Health Dr. Philip Castleman
Sias Laboratory Dr. Francis J. Black
City Bd. of Health, Worcester . . Dr. J. Coffey
Brockton Bd. of Health Mr. C. E. Bolling
Boston Laboratories (Private) . Mr. Lee
Private Laboratory Mr. A. R. G. Booth

Results of the Meeting:

(1) That a standard technique was agreed upon by each of these laboratories. This makes them state approved laboratories capable of determining the distribution of the araphenamine supplied by the state under such conditions as prescribed by the State Department of Health.

The text and tables herewith appended are description of the technique to be used and the method of standardizing the reagents.

Three antigens are to be used, one of which is to be prepared, standardized, and supplied by the State Wassermann Laboratory. The antigen prepared by the State is to be supplied without cost. It is a standardized, cholesterolized, alcoholic extract of the human heart. Full directions for its use will accompany each lot distributed.

(2) That the interpretation of reaction on the report by each of the laboratories is to be the same as that used by the state laboratory:— Positive indicates syphilis, except very rarely in acute febrile conditions such as malaria and pneumonia. Negative does not exclude syphilis. In dealing with obscure conditions less than three negatives has little diagnostic significance. Doubtful suggests syphilis. It is therefore, advisable to submit three or more specimens in such a case, and interpret a persistently or predominatingly doubtful reaction as indicative of syphilitic infection. Unsatisfactory means that the test was unsuccessful either because of the condition of specimen or some difficulty with the technique. In the latter event, the test will be repeated on the next testing day, otherwise a new specimen will be requested.

(3) It was agreed that additional means of standardizing the Wassermann test be made use of, for example: any discrepancies in the results obtained with the antigens supplied by the State and the antigen originally used by the approved laboratory is to be reported to the State laboratory. In all doubtful cases, recourse to clinical history is to be taken either by the State laboratory or the other laboratory involved, as an aid in checking the results.