

The Commonwealth of Massachusetts Department of Correction Reformatory for Women Framingham, Mass.

August 9, 1938.

Dr. William A. Hinton Wassermann Laboratory 25 Shattuck Street Boston. Massachusetts

Dear Dr. Hinton:

I am writing to ask your advice concerning a case which we have had under continued treatment for syphilis since 1935, and who has consistently shown positive Hinton tests.

For general information she is 28 years old, divorced, no pregnancies except for one miscarriage when about 15 years old.

In 1935, on admission to this Institution, she had a positive Hinton. She had no knowledge of syphilis prior to this, but was told that her husband was infected when she married him at the age of 14, and with whom she lived for six months. Her general physical examination is negative.

From November 1935 to September 1936 she received:

13 injections of Necarsphenamine 0.3 to 0.6 grams IV.
18 injections of Bismuth Salicylate 0.2 grams IM.
1 course of KI for eight weeks, gtts X T.I.D.
2 courses of Mercury Protiodide grains 1/6 increasing to grains 1 1/2 daily for one month.

Upon release from the Institution treatments were continued at an outside clinic, and then she returned here for a time. Treatments (0.0.0.) she received here amounted to:

16 Bismuth Salicylate 0.2 grams IM.

1 course of Mercury Protiodide

1 course of Potassium Iodide.

2--letter to Dr. Hinton continued. The patient has very poor veins and Necarsphenamine was discontinued. She also had some reaction to it. She had gingevitis and diarrhea during Mercury treatment and this had to be discontinged for awhile. She then developed kidney irritation and was taken off Bismuth. We would like to know the prognosis on this case. Should we continue on with treatments, and if so which medication would you advise? It seems that all she can tolerate is the KI. Do you think there is a possibility of her Hinton coming negative? Any advice you can give us on this case will be greatly appreciated. Yours very truly. Grace E. Tiffary, M.D. T/cw

August 11, 1986.

Dr. or co B. Tiffiny, Reformatory for somen, Framingson,

Deer Dr. Tif ay:

In reply to your 1 ther of august the in regard to your 20 year old divorces, I is to any that, assuming that the 11 outsirely asymptostic as I judge fro your latter, the cances of arm ving a further outsires, of symilis, on the basis of the trult ent that you are strong given ser, are stader.

I vould tains that a lumber puncture was indicated, and if this is neglitive, I bould be inclined to regard her as a 'serum rast' case and sit sole tractiont, but vould continue to observe are no to institute proopt treat ent if any signs of active symilia abould arise.

I do not and, whather or not 1 have completely energing your question. If I have not, place co not health to write se.

Very truly your ,

William A. Winton, M.D., Cnief, Vassermann Laboratory.