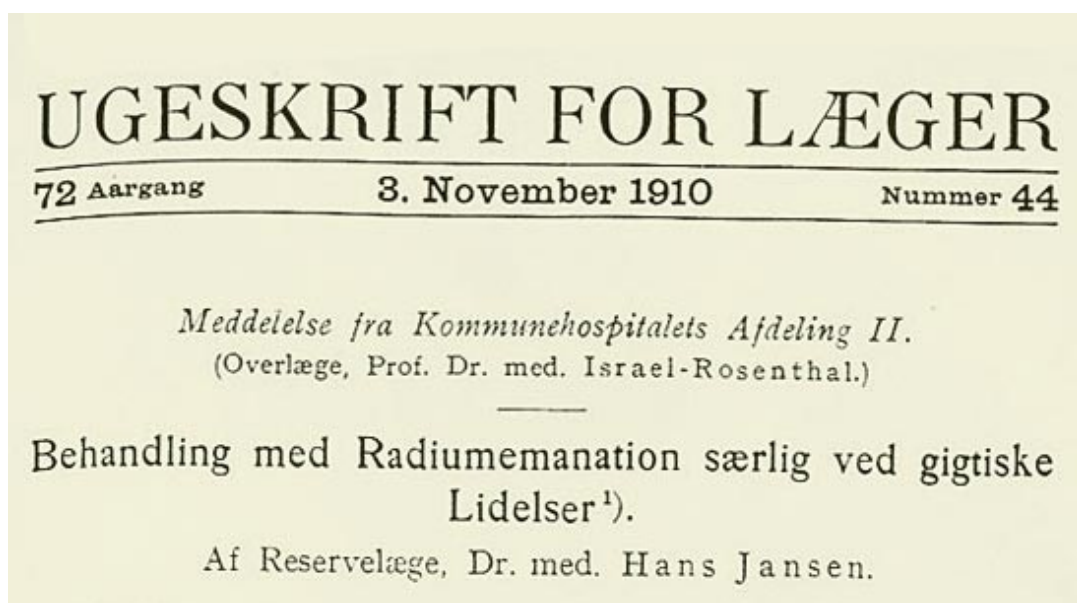


Jansen H (1910). *Behandling med Radiumemanation særlig ved gigtiske Lidelser* [Treatment with radium emanation especially with rheumatic diseases]. *Ugeskrift for Læger* 72:1333-48.

Title pages



Key passages

Naar jeg har valgt Drikkekuren til Forsøg over Radiumemanationsterapi ved gigtiske Lidelser, var det paa den ene Side, fordi den var saa nem og let gennemførlig, at blot nogenlunde gunstige Resultater vilde være meget værdifulde, paa den anden Side, fordi Forsøgene ved denne Applikationsmaade blev »renere« end ved de andre. Thi den Smule destillerede Vand, hvori Emanationen var opløst, kunde ikke i sig selv influere paa Patienterne. Eventuelle Forandringer i disses Tilstand — hvad enten det var til det værre eller til det bedre — maatte derfor kunne henføres til den indførte Radiumemanation, i hvert Fald for saa vidt som man kunde udelukke Tilfældigheder, Suggestion eller Virkningen af andre samtidig indtraadte Forandringer som Hospitalsindlæggelse, ev. Sengeleje, forandret Kost e. l.

Translation

In experiments of radium emanation therapy in rheumatic diseases I chose to give patients [radioactive water] to drink, partly because this treatment was so simple and easy to carry out [compared with radioactive baths], that even moderately favourable results would be of great value, and partly because this method of application would be

“cleaner” than alternatives, since the small amount of distilled water in which the emanation was dissolved could not by itself influence the patients. Any changes in their condition - for better or worse - could only be attributed to the radium emanation applied, insofar as one could exclude chance, suggestion and the effect of other changes occurring at the same time, such as hospital admission, bed rest, altered diet, etc.

At de Reaktioner, som nærmere skal omtales i det følgende, ikke var Tilfældigheder, men direkte Følger af Medikationen, derfor borger bl. a. den Konstans, hvormed de optraadte; og de Bedringer, der saas hos en Del Patienter, stod ligeledes i et saadant Forhold til Behandlingen, at det vilde være tvungent at opfatte dem som tilfældige.

Translation

That the reactions, to be mentioned below, did not occur by chance, but were caused by the medication, is vouched for, by, amongst other things, the constancy with which they occurred, and because [the timing of] the improvements seen in a number of patients were related to the treatment in such a way that it would be far-fetched to regard them as having occurred by chance.

Naar jeg har valgt Drikkekuren til Forsøg over Radium-emanationsterapi ved giftiske Lidelser, var det paa den ene Side, fordi den var saa nem og let gennemførlig, at blot nogenlunde gunstige Resultater vilde være meget værdifulde, paa den anden Side, fordi Forsøgene ved denne Applikationsmaade blev »renere« end ved de andre. Thi den Smule destillerede Vand, hvori Emanationen var opløst, kunde ikke i sig selv influere paa Patienterne. Eventuelle Forandringer i disses Tilstand — hvad enten det var til det værre eller til det bedre — maatte derfor kunne henføres til den indførte Radiumemanation, i hvert Fald for saa vidt som man kunde udelukke Tilfældigheder, Suggestion eller Virkningen af andre samtidig indtraadte Forandringer som Hospitalsindlæggelse, ev. Sengeleje, forandret Kost e. l.

Translation

The possibility of suggestion undeniably required considerable consideration. It is, of course, understandable that a remedy associated with radium, that mysterious and costly substance, and which is given in doses measured in thousands [of units], may easily act through suggestion. I sought in every way to avoid this suggestive factor. The hospital patients were told as little as possible about what they were given. On several occasions I used quite different designations, such as, for instance, “the new Aspirin without taste”. I always emphasized to the outpatients that they must regard this remedy as an experiment that might fail as well as succeed. In the hospital we often started the treatment by giving distilled water, and when that alone had not induced an improvement, the patients, without their knowledge, were given radioactive water. That was easily attained as the radioactive water had no taste. In two cases of sciatica such an improvement occurred during treatment with distilled water, in one of the cases with the addition of Fachinger salt [a sodium-rich mineral water], so additional treatment was unnecessary. The improvement in these cases was probably caused by confinement to bed and rest rather than by suggestion. That leads us to:

Den tredje Fejlkilde, nemlig **Virkningen af Hospitalsindlæggelse**, og hvad dermed følger. Alene det, at en Patient bliver fritaget for Arbejde, eventuelt holder Sengen, faar en forandret, maaske mere hensigtsmæssig Kost, udelukkes fra Excesser *in Baccho et in Venere*, faar sin Afføring i Orden o. l., er alt sammen Forhold, der i sig selv virker gavnligt og ved lettere Tilfælde af Gigt og Neuralgier maaske kan være nok til Helbredelse. Denne Fejlkilde maatte man utvivlsomt regne med, dog reduceredes den betydeligt i de ikke sjældne Tilfælde, hvor Kuren først ordineredes, efter at Patienten allerede havde ligget nogen Tid paa Hospitalet og faaet anden Behandling med utilfredsstillende Resultat. — De ambulante Patienter var i denne Henseende bedre, idet en Lindring resp. Bedring, der indtraadte, uden at Patienten gjorde andet derfor end at drikke radioaktivt Vand, jo var meget talende. Paa den anden Side var de ambulante Patienter vanskelige at observere nøjagtigt, og deres Lidelse var ofte ret let, saa at tilfældige Bedringer her maaske kunde spille ind med.

Translation

The third source of error, namely the effect of admission to hospital, and the consequences of such admission. The very fact that a patient is exempt from work, perhaps stays in bed, receives a changed, possibly more appropriate diet, is excluded from excesses in Baccho et Venere, regulates bowel movements, etc., may by itself have a beneficial effect, and in milder cases of rheumatism and neuralgia it may suffice to effect a cure. There is no doubt that this source of error must be taken into account, but it is reduced considerably in those not uncommon cases in which the treatment is delayed until the patient has already been admitted for a period of time and has received other treatments with unsatisfactory results. In this respect the outpatients were to be preferred, as alleviation or improvement while the patient did nothing to try to achieve this apart from drinking radioactive water, spoke for itself. On the other hand, it was difficult to make accurate observations in outpatients, as their disease was frequently mild, so that improvement occurring by chance might have played a role.

As shown by these reflections, my eyes have been open to the many possibilities of erroneous conclusions, and when I mention the effects and benefits of drinking radioactive water below, I have taken all the abovementioned factors into account.

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