

## How I got to be in the Kaiser's Bedroom (or An Outbreak of D & V at Osborne House).

The Isle of Wight was chosen by Queen Victoria for a summer residence. She wrote:

"It is impossible to imagine a prettier spot".

"We have a charming beach quite to ourselves"

"We can walk anywhere without being followed or mobbed"

It is thus uncertain whether the Island was chosen for its beauty or because it provided seclusion for the Queen and her family.

The Queen had a great attachment to Osborne House on the Island, not least because the house had been designed by Prince Albert (although it was noted that Thomas Cubitt gave 'practical advice'). Following the death of Prince Albert, Queen Victoria spent much time at Osborne House and each of her children had a suite of rooms permanently made up for them, so they could visit at any time. Queen Victoria had nine children, the eldest of which, Vicky, married the first Kaiser of Germany. (The second Kaiser - the Kaiser during the First World War - had a great dislike of the English. He was a breech presentation and his birth was very difficult. Unfortunately, as a result, one of his arms was partially paralysed. The Second Kaiser put this down to a disagreement between the doctors who attended his Mother and in particular blamed an English Obstetrician who had been sent to his birth by Queen Victoria. It has been suggested that this was the origin of the second Kaisers dislike for the English and thus partly for World War I).

Enough of a digression, but it does explain why I was so interested to be shown into a room that was once the Kaiser's bedroom. I had been called to Osborne House, together with a team from the Environmental Health Department of Medina Borough Council, as residents had developed D & V. (After Queen Victoria's death, Osborne House was given as a rest home for Officers and Civil Servants).

An Outbreak Control Team was formed, including the following:

Consultant in Communicable Disease Control  
Environmental Health Department  
Registration and Inspection Unit  
Osborne House

15 residents and 10 staff were affected by an illness that lasted 24-48 hours and whose most prominent feature was vomiting. The epidemic curve strongly suggested a point source outbreak but, in spite of intensive effort, a testable hypothesis was not generated. It is possible that the outbreak was transmitted by one of the care staff whose children had been ill at home. It was that particular care assistants practice to change for work at home. One of her children may have vomited and deposited viral particles on the clothes of this staff member. The viral particles may then have been transmitted to the residents as this lady waited on them at dinner. This hypothesis was untestable and it is important that individuals were not 'blamed' for an outbreak where this would not serve a

purpose. Osborne House have changed their practice and now insist that staff members change on arrival at work. Staff members also have to have their work clothes laundered at the house (free of charge to staff members).

No bacterial or viral organism was isolated from diarrhoea samples collected from those who were ill.

Owen Caul at Bristol (0272 291326) was consulted after the outbreak. He advised that laboratory technicians do not like to handle vomit and prefer diarrhoea to work with.

Viral particles will only be identified by electron microscopy within 24 to 48 hours of the onset of the illness when there are 10<sup>6</sup> viral particles per gram of diarrhoea (in the case of the Norwalk agent). Even then the detection rate in these circumstances is only 10 to 20%. Dr Caul has improved the detection rate by coating the grid of the EM microscope with antibodies to 'gastro intestinal' pathogens. There is a possibility that PCR bench techniques, not involving an EM microscope, will be developed in future.