

A. vittatus cell line differs from *A. albopictus* cell line in its susceptibility to arboviruses in the following respects. Firstly, the group B mosquito borne viruses such as JE and WN, which produce characteristic cytopathic effect in *A. albopictus* cell line do not produce any cytopathic effect in *A. vittatus* cell line, although the multiplication of the viruses are comparable in both the cell lines. Secondly, DEN-2 and GAN viruses multiply well in *A. albopictus* cell line and not in *A. vittatus* cell line. However, it appears from the present study that *A. vittatus* cell line is equally or more susceptible to arboviruses than *A. w-albus* and *Anopheles stephensi*¹³ and *A. aegypti*^{5,6} cell lines.

It is also interesting to note that maximum titre of all the viruses tested was obtained on the 3rd or 4th PI day, excepting JE virus which showed the maximum titre on the 10th PI day. Further, with JE virus there was a decrease in titre by 4 logs between 10th and 15th PI days. This decrease in the virus titre might be due to the loss of extracellular virus while changing the medium on the 10th PI day. However, such a sharp decrease in the virus titre was not observed with other viruses even after changing the medium on the 10th PI day. Therefore, an additional experiment was carried out to determine the exact cause of decrease in the titre of JE virus by 4 logs between 10th and 15th PI days. The concentration of extra and intracellular virus was assayed without changing the medium of the culture any time after virus inoculation. The results indicated that the concentration of extracellular virus was always higher than that of the intracellular virus by about 2 logs. Therefore, the drop in the titre of JE

virus observed on the 15th PI day in the initial experiment was due to the fact that most of the extracellular virus was lost while changing the medium in infected cultures on the 10th PI day.

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MALARIA ON THE RISE IN SOUTH-EAST ASIA

RECENT reports from several of the countries in the South-East Asia Region of the World Health Organization (WHO) indicate that malaria after having been taken to the point of the maintenance phase—where transmission of the disease no longer takes place—has resurged. The increasing number of positive blood slides in these countries show that the total number of malaria cases is on the rise.

In India, the incidence of malaria as indicated by positive blood slides began to rise in 1963 and has continued almost uninterruptedly since that time. The increase was gradual until the end of 1968, and then rose sharply. In 1966, there were about 148, 156 positive blood slides. By 1971 January to November, the number was over one

million. However, the four States of Gujarat, Madhya Pradesh, Maharashtra and Rajasthan account for 83% of the total.

The ten most affected States in India are Gujarat, Madhya Pradesh, Maharashtra, Rajasthan, Mysore, Punjab, Orissa, Haryana, Assam and Andhra Pradesh. Some examples of the rise in positive cases reported: Gujarat went from 269,301 in 1970 to 430,785 during January to November 1971; Maharashtra from 91,319 to 146,085; Mysore from 2,417 to 33,760; Punjab from 15,886 to 30,972; Orissa from 11,338 to 24,333; Haryana from 15,897 to 23,287. Delhi itself was not spared, malaria positives rising from 1,056 in 1970 to 3,778 during January to November 1971.

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