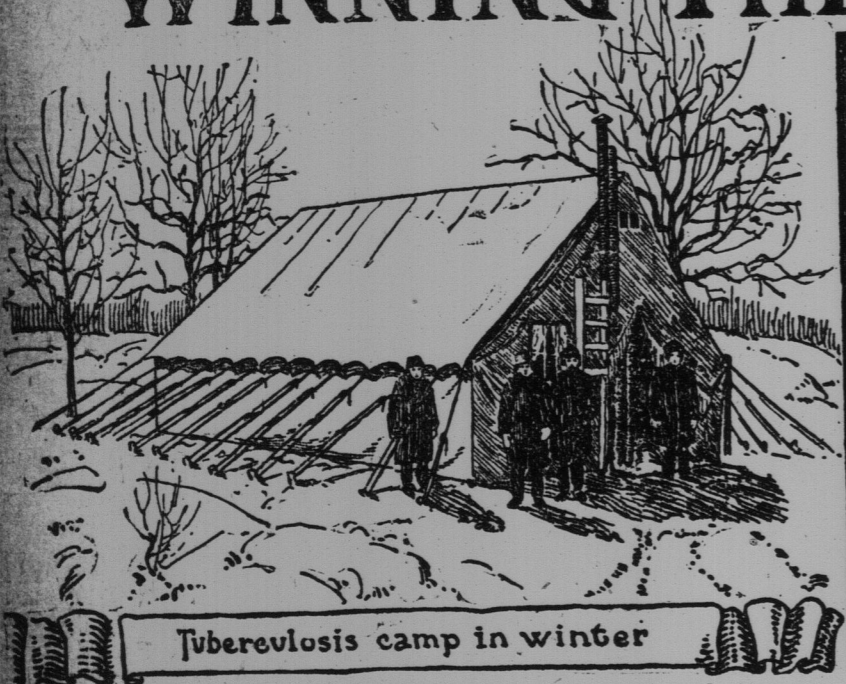
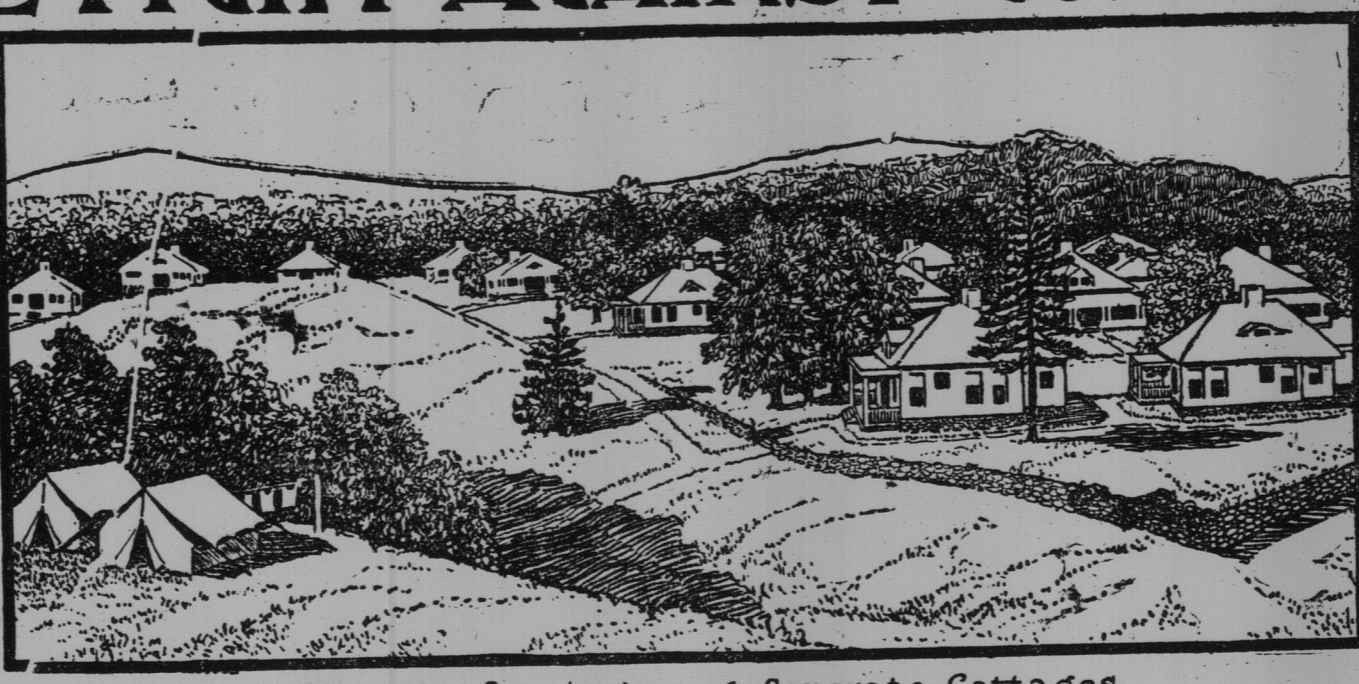


ST. JOHN STAR, SATURDAY, AUGUST 12, 1905

WINNING THE FIGHT AGAINST CONSUMPTION



Tuberculosis camp in winter



Mountain Sanatorium of Separate Cottages



And It Is a Winning Fight, Too, as the Statistics of the Last Few Years Prove Beyond a Doubt.

Only Within the Last Ten Years Has the Fight Become at All General or Engaged the Attention of More Than a Few.

Twenty Years Ago There Was but One Sanatorium in the Country; Now There Are Hundreds, and More Building.

BY JOHN J. HAINES.

It has been twenty-three years since Koch discovered the bacillus of tuberculosis. It has been twenty years since Dr. Edward L. Trudeau pointed out to an incredulous world that fresh air remedies needed to overcome incipient tuberculosis. Koch discovered the whereabouts of the deadliest enemy of the human race. Trudeau threw down the gauntlet of battle, and, practically alone, waged warfare upon the common enemy for years. It has only been within the last few years that the medical world has overcome its incredulity and taken a stand on the line of battle with Trudeau. Within this same short period the latter has also suddenly awakened to the importance of the fight, and taken up weapons, so that the battle has at last become fairly general along the line for the first time.

It is, indeed, surprising to learn how the enemy has been driven back in many parts of the field since the idea of tuberculosis is vulnerable, after all. THE MEN WHO KEEP THE WAR-CHEST FULL.

A few years ago wealthy men whose individual contributions to various charities totaled hundreds of thousands of dollars annually, would not give a cent toward furthering the movement against tuberculosis. This movement of practical charity, and they could not be made to realize how vital the matter was to the community. Chief among the well known men who are intensely interested in the fight is Henry Phipps. He has given a million dollars to the Henry Phipps Institute for the Study, Treatment and Prevention of Tuberculosis, founded two years ago in Philadelphia; and the Baltimore Tuberculosis Dispensary was also made possible by a munificent gift by him. His nephew, Lawrence C. Phipps, of Pittsburgh, has recently erected and equipped a sanatorium in Denver for the reception of incipient cases. John D. Rockefeller's contribution has amounted to several hundred thousand dollars in the last few years. It is stated on good authority that not less than a quarter of a million dollars represents the sum annually contributed by J. Pierpont Morgan and the same authority—one of the physicians most actively interested in the fight—says that the name of Ametree appears in the lists of regular contributors.

HOW MUCH OF THE MONEY IS GIVEN. Except in the case of the Phippses and a few others who have founded tuberculosis institutes and dispensaries, most of the millionaires contribute their money to support the most meritorious of the so-called private sanatoriums for consumptives which have dotted the country within a comparatively brief period. Careful investigation by the National Association for the Study and Prevention of Tuberculosis shows that by far the large majority of these private sanatoriums are not the money-making propositions that many naturally suppose them to be, since they receive neither state, county nor municipal support. They have been founded by physicians with money furnished by philanthropic backers, and it is these latter who make up the large deficit incurred in the running of these institutions by charging the patients only nominal sums for treatment. For example, the largest and most famous private sanatorium in this country makes a weekly charge of only \$5, which scarcely covers the food item, depending on the income from its endowment of three-quarters of a million dollars to balance the sheet at the end of each year. This endowment, by the way, has been established by a half dozen Eastern financiers.

THE SPREAD OF THE SANATORIUM.

The remarkable growth of the sanatorium movement is representative of the extent and fierceness of the fight now being waged upon tuberculosis. Before 1886 not a single sanatorium for consumptives existed in America.

Prior to that time the humane thought they were doing everything necessary for consumptives when they founded homes to shelter them till they were mercifully relieved of their sufferings. Once a consumptive, even though his case was incipient, entered such a home, he abandoned all hope. But in 1885 Dr. Trudeau, with a shanty in the heart of the Adirondacks as headquarters, started his experiment of arresting incipient tuberculosis among his handful of patients by means of constant and consistent living in the open and the consumption of plenty of nourishing food, such as milk, eggs and the most nutritious of the meats.

To the intense surprise of the medical profession, the experiment turned out successfully. But what seems astonishing now, there was no decided attempt to follow up this initial success, which held out such large promise, by the erection of other sanatoria either by individuals or the state, and only at long intervals did a sanatorium spring into existence.

As late as ten years ago less than fifty sanatoria were at work in this country and Canada. Within the latter half of this period has come the sudden and full awakening and the sanatoria have increased until today they number nearly 300. An example of their growth is evidenced in the statement that in three years, ending last January, as many sanatoria were built as in the seventeen years which followed the opening of the pioneer sanatorium.

THE STATES ENTER INTO THE FIGHT.

Until the year of the war with Spain the sanatorium movement remained in the hands of individuals and some few county medical societies. In that year Massachusetts established the first state sanatorium. Last year the State of New York opened a sanatorium in the Adirondacks; five other states are building sanatoria; in the legislatures of several others bills for such sanatoria are pending; and two sanatoria which receive provincial subsidies have recently been opened in Canada.

The sum of money represented by these famous institutions would make a man a millionaire several times over. New Jersey's sanatorium, now in course of construction, is to cost a quarter of a million dollars; this is exclusive of equipment and the purchase price of six hundred acres of mountain land on its site. In addition, when a state founds a sanatorium, it usually charges a patient only a nominal weekly sum, the state agreeing to make up the difference in the expense of treatment. In Massachusetts the weekly charge is four dollars, and last year the state paid over nine dollars a week for each of the two hundred and seventy-five patients treated in the sanatorium.

Recently several counties have founded sanatoria; the government has established army, marine and naval sanatoria; the sanatorium method has been adopted by various municipalities in their hospitals, almshouses and prisons; and New York city, besides so treating as many poor consumptives as its facilities will permit, has just secured a farm of 1,300 acres in the Shawangunk Mountains as a site for a sanatorium which will accommodate four hundred patients. The first appropriation for this work totals a quarter of a million dollars.

THE WONDERFUL WORK OF THE SANATORIUM.

The winning part of these sanatoria are taking in the fight is shown by the records. In the Massachusetts State Sanatorium "seventy-three per cent. of the incipient cases discharged in the last three years have had the disease arrested or apparently cured, and in a majority of the Adirondack sanatoria has discharged about 75 per cent. of its incipient patients with the disease arrested or apparently cured, and in a majority of the other bona fide sanatoria equally gratifying results have been obtained.

These statistics not only prove to the student of the tuberculosis problem that consumption can be cured if treated in time and under proper conditions, like any other disease; they further convince that "climate is not an essential nor even an important factor in its treatment. What was once said of whisky applies to air—some whisky may be better than other kinds, but no whisky is poor." But before the sanatoria proved this point incontrovertibly, it was pretty generally held that the consumptive's only hope was to seek

such dry climates as are found in Colorado and some of the other Western States and Territories. Now the medical profession declares positively and with unanimity that incipient tuberculosis can be cured by the outdoor and good food treatment in almost any given locality and climate. This is a new found weapon that has been of great service in the fight.

The application of this principle outside of sanatoria even has led to many well authenticated cures. A certain eminent physician of New York city has effected apparently a dozen such cures within the last four years right in the city itself. His practice is to secure a patient some light, open-air work and to make him sleep in the open air as far as conditions will permit. The majority of the cures have lately been effected among the uptown stations of the elevated railroads. From time to time cases of persons who have themselves arrested tuberculosis in their bodies by living out of doors and eating the proper foods come to the notice of and are vouched for by the medical profession.

DISPENSARIES FOR CONSUMPTIVES.

A further recognition of this principle is found in the dispensaries established for the treatment of tuberculosis patients solely. The first dispensary of this kind began in Lille, France. Since 1900 some thirty similar institutions have been established in the cities of the United States, the major portion within the past three years. The method usually followed by these dispensaries is in the treatment of patients representative of the method employed along the line of battle. The patient is not merely supplied with any drug that may be considered necessary; he is instructed concerning what means daily to take to prevent the spread of the disease, and in this manner the public receives protection. Still again, the patient is visited in his home by a special visitor or a trained nurse, who instructs him how to disinfect his home properly, provides him with the proper food when necessary, and in other ways supplies his material wants as the emergency of the case demands. Many of the dispensaries furnish their patients with printed instructions in their respective native languages.

By means of its dispensaries, its sanitary inspection of tenements, its Terment House Department, the open air treatment of the tuberculous inmates of its various institutions, its educational measures and the visits to consumptives in their homes, and the work of leading charitable organizations, the decrease in the death rate from pulmonary tuberculosis in New York city (the Boroughs of Manhattan and the Bronx) fell from 3.6 per thousand in 1884 to 2.46 per thousand in 1904. In considering this decrease it must not be forgotten that only within the last few years has New York, or any other city, for that matter, taken any serious concerted action against tuberculosis. It is also interesting to note that the death rate for the entire country, which was 3.3 in 1871, is now 2.1 per thousand population, and here it must be borne in mind that in many parts of the country today no more is being done to fight the disease than was done in the seventies.

WHAT THE CITIES ARE DOING.

In fifty-nine of the cities of this country of more than 50,000 inhabitants tuberculosis is now recognized as a communicable disease, and in the majority steps have been taken within recent years to combat it. Much of this work is of a preventive nature, such as the disinfection of houses and apartments in which consumptives have lived prior to their occupancy by new tenants; and the Health Departments of at least thirty of these cities are engaged in distributing "more or less widely, circulars of information in regard to the nature of consumption, how to avoid contracting it or giving it to others, and how the consumptive should live. In some of the cities public lectures are given upon this subject; and in both lectures and literature that tuberculosis is preventable and curable if only common sense is brought to bear in the prevention and treatment of the disease. These circulars and lectures, written and delivered by eminent medical authorities, furnish ample proof that tuberculosis is no longer a disease of despair.

The municipalities are not limiting their energies to fighting incipient tuberculosis. They are also endeavoring to receive their serious attention, that they may not cause infection. In New York, if an advanced patient, or one of the crowded conditions of living in the immediate neighborhood make it exceedingly easy for the disease to spread despite precautions, the right of forcible removal is exercised, and the patient is placed in a hospital where the most effective means for the treatment of such cases. Many municipal hospitals are now so equipped, and the penal institutions in not a few States have lately provided wards for the exclusive use of advanced tuberculous patients, besides subjecting incipient cases to the open air treatment as far as prison life will allow.

As is the rule in a number of cities, New York requires the registration of all consumptive cases, and in this way is better able to protect the general health of the community, since it employs a staff of visiting physicians and nurses who give aid and instructions to those patients who, by reason of their poverty or ignorance of the possibilities of the disease, would otherwise be a source of great menace. When necessary the city furnishes free of cost the approved sanitary appliances used to prevent the spread of the disease.

A RECENT DEVELOPMENT IN THE BATTLE.

The most recent development in the fight is that of the organization of associations comprised of both physicians and laymen. This movement is under the auspices of the National Association for the Study and Prevention of Tuberculosis, only a little over a year old itself.

Five years ago there was only one association of this kind in the country; today there are twenty-two in almost every State, and new ones, both State and local, are being organized almost every day. Local associations have towns, cities and counties for their field; these are affiliated with State associations, which not only look after the state generally, but super-

vised the local associations, and the State bodies in turn are affiliated with and supervised by the National Association, of which leading medical men as Dr. Hermann Biege, of New York; Dr. William Oler, George M. Sternberg, formerly surgeon general of the United States Army, and Dr. Lawrence F. Flick, medical director of the Phipps Institute in Philadelphia, are members. Among the prominent laymen of the National Association is Henry Phipps.

The primary object of the National Association and its affiliated bodies is to prevent and cure tuberculosis by interesting the laity generally in the task; and this it is doing by putting the situation before the public in a popular manner. Not only have public printed pamphlets been induced to enlist in the fight, but literature distributed broadcast, through the efforts of the various associations railroad and street railway companies have been led to disinfect their cars, and many of the dust-producing trades, all of which are extensively conducted in the development of tuberculosis, have been made to realize that with proper precautions the spread of the disease can be checked in its infancy. In November of this year the National Association will hold an American Tuberculosis Exhibition in New York city. Charts, illustrations, models and simple sanitary appliances will show how the disease is being fought successfully; but, more important still, an effort will be made, by means of popular lectures, to secure the co-operation of the labor unions and other bodies of workers in the fight by pointing out how a few simple precautions on their part will lessen the death rate among their membership.

A CAR OF INSTRUCTION.

Following the example of the Department of Agriculture in sending a specially equipped car into the farming regions to give instruction in the latest methods of agriculture, the National Association is planning to send out a car for the instruction of small towns and cities in the prevention and cure of tuberculosis. This car will be equipped with charts showing the decrease of tuberculosis in communities where it is scientifically sanitary appliances used in the treatment of the disease and models of open-air structures, written in a popular vein by eminent authorities, will be distributed, and these in charge of the car will deliver lectures whenever practicable.

While making this novel attack on the enemy, the National Association will emphasize especially the point on which it is continually laying stress—that tuberculosis is preventable and curable—that it is not a hopeless disease, but one which can be prevented and cured successfully if only common sense is used, and if both he who is free of the disease and he who is an incipient patient will but seek the open air at all times and live on such health sustaining foods as milk, eggs and the more nutritious meats, all of which are easily procurable by the great majority of the people.

HOW TUBERCULOSIS WILL BE VANQUISHED.

The universal dissemination of this

message of hope and the putting of it into universal practice are the two weapons which will ultimately vanquish the enemy, or lead to its control, just as smallpox and diphtheria are controlled to-day. So declare many of the leading generals in the fight. Now is the time to see that day, but that it is coming, no better proof can be found than that many of us who once looked upon tuberculosis as a hopeless disease have lived to see the day when it is being slowly but none the less surely driven back by the warriors fighting under the united banners of Hope and Common Sense.

OR SAYS THE THREE-QUARTER COAT.

TIME in broadcloth will be a smart notion for calling attention. All the best fashion cards denote this, and it is a matter that appeals to good taste and common sense. Broadcloths will be in high favor all fall and winter, and it will not be a little surprising if they start the season with a boom. It is surprising, too, how velvet is forging to the front as a costume material, reminding us vividly of those old days when it was so very popular.

SOME NEW IDEAS FOR MISSES' SKIRTS ARE OFFERED BY LEADING MODISTES, among which is the now-popular circular type. Skirts with both side and box plating are being made, but they are adding more and more to the number of gowns each month, it seems. I confess, however, that when stitched as far down as the hips, and then allowed to flare sharply, the model suits the girlish figure to perfection. These prettily flaring skirts, I think, are the limit of smartness for the maidens. Flounced skirts are nice, too.

I HOPE THE OLD FASHIONERS ARE NOT WRONG AGAIN, FOR WE NEED A CHANGE, which hope I am sure is shared by three-quarters of the feminines in St. John. All spring and summer we have jugged along without any particularly stylish tints or hues, and something seemed to be lacking. Now there are prospects of a few fresh shades. They say (did "they" say ever strike you as funny?) that the range of blues presented in the merry spring-time will stand true. That rose and geranium, though not exactly new, will be seen in high-class dress materials. In velvets and fur trimmings plum and prune—those boarding house adjuncts—will be conspicuous. Greens are on the card, too, but dear me, some of them are actually yellow; a sulphurous, mustard, saffron cast. I hope the women won't wear them, but you know how weak the weaker sex really is when Fashion stamps her tiny feet. Then, there will be a pretty and quiet range of greys, some lovely lavenders, a few purples, and browns that resemble cinnamon, copper, etc. The greys are to have some funny new names—at least in New York—such as "Hait-ee," "London Fog," "Smoks" and "Moose."

JUST THE NAME.

Customer—Which way is the timepiece department? I want to buy a pair of hose. Clerk (surprised)—Why, only a watch and clocks in the timepiece department. Customer—Well, I want open-cloth hose.

DOWN ON THE FARM.

"But I don't see any mosquito netting in my room," said the young man who has just arrived. "Don't need any," replied the old farmer. "The mosquitoes are so big down here you can just put on a catcher's mask and keep them off. You'll find a mask hanging under the clock."

A CLEAR-HEADED LADIES' TAIL.

WHEAT ST. JOHN WOMEN WEAR WELL, OLD DAME FASHION SEEMS TO BE GETTING DOWN TO BUSINESS, for the stores are fast filling with new goods, dressmakers and ladies' tailors are displaying new models, milliners are being to the big cities and here and there an "advance display" bobs up. August will be the rag-end of the warm season; then comes the crush of attire for frost time. I know of several ladies who have already placed orders for street costumes to be worn early in September, so that they will be among the pacemakers, don't-cher-know, those who always set the fashion hereabouts.

ONE LEADING QUESTION IS: "WHAT ARE THE COATS GOING TO BE LIKE?" Well, sisters, as far as I can make out the general effect is to be loose and boxy, almost mannish in some models. There will even be patch pockets on a few. There will be innumerable variations upon the Eton and Bolero shapes, and tightly-fitting outer garments the whole outfit is loose in effect, with belts, buttons, etc. All the popular cloths and a few new notions as to adornment.

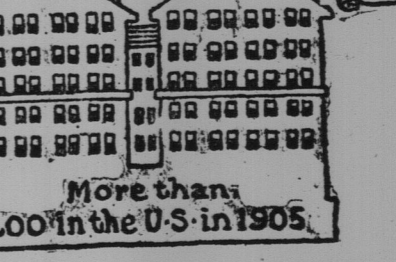
THE universal dissemination of this



Death rate in 1871- 33 per 1000
Death rate in 1904- 2.46 per 1000



IN 1900, 145
IN 1905, 45
Increase in the number of associations in 5 years in the U.S.



Less than 50 in 1895
More than 200 in the U.S. in 1905

The number of Sanatoria in the U.S. has more than quadrupled in 10 years.

WHAT ST. JOHN WOMEN WEAR, AND ARE LIKELY TO WEAR. A Little Commonsense Chat, not on New York or Paris Styles, but Home Styles. By POLLY CADABOUT.