

NOTES ON SANITARY PROGRESS—DISCUSSIONS AT THE MEETING OF THE
BRITISH MEDICAL ASSOCIATION.

FOR the following valuable notes, mainly on subjects discussed at the August annual meeting of the British Medical Association, we are indebted chiefly to late numbers of the British Medical Journal, New York Medical Journal and Glasgow Medical Journal.

SALE OF TUBERCULOUS FLESH AND MILK.—At a recent meeting of the Scottish Veterinary Association, the government was petitioned to stop the sale of milk from animals suspected of being infected with tuberculosis, and to suppress the consumption of the meat of such animals, owners being recompensed for the value of the latter. This petition is the outcome of a recent trial in Glasgow relative to the question of condemnation of a whole carcass if tuberculosis was present in a limited portion, in which two carcasses were adjudged unfit for food. The grounds of the judgment were that tuberculosis in the lower animals was the same disease as tuberculosis in man; that it was transmissible by ingestion of flesh or milk; and that though the disease might seem limited to the viscera, the flesh appearing healthy, yet the tubercle bacillus might be there. It was ruled that "except on the footing that the meat was the medium of transmission of the disease, it would be unnecessary and wasteful to exclude from the food supply the carcasses of animals which had suffered from tuberculosis, however generalized and extensive." The interest of the public health, however, was paramount to the question of a small loss of food supply.

INTERESTING RESULTS OF EXAMINING CHILDREN IN LONDON SCHOOLS.—A committee to investigate the physical condition of the pupils in London schools was appointed by the psychological section of the British Medical Association, and, on account of the refusal of the London School Board to allow the investigations to be made in their schools, the observations had to be confined to fourteen elementary schools. The results of the examination

are given, without comment, in a series of lengthy tables. There were 1,944 boys and 1,987 girls examined: among these there were signs of nerve weakness—nervous hand, weak hand, lordosis (curvature of bones), toneless orbicular muscles of the eyelids and finger twitches—in 207 boys (10·6 per cent.), and 144 girls (7·2 per cent.); with defective nutrition there were 100 boys (5·1 per cent.), and 84 girls (4·2 per cent.); with mental dullness there were 153 boys (7·8 per cent.), and 78 girls (3·9 per cent.); with cranial abnormalities—rickets, large head, small head, narrow forehead, &c.—there were 166 boys (8·5 per cent.), and 65 girls (3·2 per cent.); with defects of the eyes—squint, myopia, disease of the lids, cataract, loss of the eye, &c.—there were 74 boys (3·8 per cent.), and 75 girls (3·7 per cent.) One or more of the conditions were found in the same child occasionally. Only in defective nutrition and ocular defects were the sexes equal; strange to note, nerve-weakness was greater in the boys than in the girls, and the other defects were almost twice as common in boys as in girls.

TRAINING OF LOCAL HEALTH OFFICERS.—The chairman of the Section in Public Medicine (Dr. E. Ballard), has presented the results of his extensive experience with local health officers in a consideration of their necessary qualifications. He considers that such an official should have a wider range of information than is requisite for the general practitioner, adding to the knowledge required by the latter, an acquaintance with meteorology, geology, sewer and water engineering, the construction and ventilation of houses, bacteriology, and the laws governing epidemic contagia, and even the pathology of animals. His scientific education should be supplemented by a course of training under a health official; and he must never forget that he is not an autocrat, but always display tact in dealing with his constituency. In the discussion on the paper it was agreed that the local health officer should be appointed by the state,