

of late years in spite of over-crowding and the increase of population, etc., which would increase the risks of infection. It is better nutrition, avoidance of infectious fever, better sanitation and ventilation, that are probably the cause of improvement. He hopes the medical profession will not encourage the public to avoid their tubercular fellow-creatures. Such a course will not, in his opinion, diminish the amount of tuberculosis. It will swell the ranks of the unemployed; it will depress the phthisical wage earner's spirit; it will empty his pockets and ultimately, by want and distress, reduce his family to that condition of low vitality which the tubercular bacillus requires for a successful invasion. He says that it does not require insolation and is infectious only under exceptional conditions, insists that healthy people may enjoy extraordinary immunity, that fresh air and open windows are the great armor against its attacks, and that the instruction of the young in general principles of hygiene will prove more valuable eventually than the insolation measures proposed.'

Concluding, it may be suggested to the profession, particularly in the country districts, to keep the tubercular patient at home. Educate the public along the lines indicated, initiate and follow up scientific modern hygienic cures of home treatment, cure them and insist upon receiving the credit for your labor, or failing to cure let them die among friends. If they are bound to spend money, let it be at the nearest sanitarium. By comparison, the stand taken by the profession in Nova Scotia on tuberculosis is most commendable, yet there is still opportunity for better and more effective warfare against this too prevalent disease.

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