

am not now referring to ignorance on the part of the medical officers but on the part of the local boards. The medical health officer cannot act in such cases without their sanction, and as is well known the knowledge to understand the necessity for action is not the constant equipment of every member of local boards. This I have reason to know to my cost.

Dr. Bryce, our energetic provincial secretary, has, I am sure, enlarged his already extensive geographical knowledge of the Province by his numerous flying trips this spring to all parts, organizing measures to be taken against the small-pox. With efficient lieutenants Dr. Bryce ought to sit tight in Toronto as commander-in-chief, directing his officers in the field, only to take command himself where and when he deemed his presence essential.

I would like now, still perhaps in fault-finding mood, to point out a few matters that seem to me to demand more attention than they are receiving in many parts of our country. First with regard to typhoid fever we find only a few medical officers endeavoring to trace to its probable source a case of this fever. In consequence no steps are taken to prevent further infection from such a source. Certainly by obtaining a purer water supply in our cities and by more care in our milk supplies typhoid fever seldom occurs now in epidemic form. But if we ever wish to stamp out the scattering cases that do occur all over our Province some investigation should be made into every case and of course the patients excreta should be very carefully disinfected. Many cases of typhoid are not returned as such, but escape notification by being classed as continued fever, gastric fever, remittent fever or "typho-malaria." The Widal test does fairly efficient work in clearing up these cases.

Again we have in many localities great laxity in the matter of isolation of infectious cases, particularly of the mild cases. Parents make differences between scarlatina and scarlet fever and often do not call in a physician and certainly do not notify the medical officer in mild cases so that isolation in such cases is the exception. Owing mainly to laxity on the part of parents mild scarlet fever has existed in Kingston for over two years and I do not think it will be stamped out till all susceptible are attacked. A few severe cases would change the aspect of