

REPORT ON CONSUMPTION IN ONTARIO.

It has been found, from the returns of deaths to the Department of the Registrar-General, that there has been for many years a much larger proportion of deaths from consumption in some counties in Ontario than in others. In the County of Prince Edward, for example, the proportion of deaths from consumption, as compared with the total number of deaths from all causes, has been nearly three times as great as in the County of Grey. In Hastings, Lennox and Addington, Fontenac, Northumberland and Durham, Leeds and Grenville, and Haldimand, it has been much above the average. With these facts in view, we sent circulars some months ago to a large number of the physicians practicing in these counties, asking their opinion, based on "careful observation and consideration of cases," as to the cause or causes of this greater mortality from this disease in these localities. Though many have not yet replied to the circular, many have done so, and we have gathered therefrom the following facts:

1st. That in these older settled counties intermarriages have taken place to such an extent that there are in some sections but few families who cannot trace a relationship to a family or families in which consumption was common. Hence hereditary predispositions are common, especially amongst the older families.

2nd. Habits of life help greatly to give rise to the disease in those inheriting a strong predisposition, and to even develop it in others with less or even no predisposition, to the disease. Families are mostly well-to-do, and luxuries are much more abundant than they were many years ago. Dwelling houses are kept too close and warm, and with furnaces instead of fire-places, and the people sleep in close, unventilated bedrooms. Pork and pastry are very common articles of diet.

3rd. The possibility of contagion is not regarded, and consumptives sleep and mingle with others of the family.

4th. The nature of the soil in many localities is favorable to consumption, being heavy and lying flat, with bad natural drainage. In Prince Edward, especially, there is a good deal of dampness of atmosphere and sudden changes in temperature. Here, too, the "coast-line is made up of alternate points and marshes."

We have here, then, all the recognized causes of consumption existing much more generally than in the newer counties, and as effects invariably follow causes, we should expect consumption to be prevalent in these counties.

These causes, as any one can see, are all removable, if we except the excess of humidity in the air of Prince Edward County, from surrounding water, and the sudden changes in temperature. Much of the humidity could be removed by drainage. In vigorous constitutions the sudden changes would not usually give rise to any serious effects. With a vigorous practical application of public and private hygienic knowledge, the disease might doubtless be almost entirely eradicated in a few years in these as well as in other counties. Shall such a desirable consummation ever be reached?

PUBLIC HEALTH LEGISLATION.

To the Ontario Government must now belong the credit of being the first in Canada to legislate on State Medicine and provide for the organization of a Central or Provincial Board of Health—a Government Board, for the promotion of the public health in the Province. A bill for this purpose has passed the Legislature, and has become a law of the Province. Such legislation has been looked for by many from session to session for several years past, but it appears that the Government thought the