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BUILD INFLUENZA CAMPS NOW!

IN the December issue of the "Journal" of the Boston Society of Civil Engineers, 26 pages are devoted to a discussion of the cause, prevention and treatment of influenza. While this is unquestionably a medical rather than an engineering subject, the vital importance of fuller public knowledge concerning this epidemic fully justifies its discussion by any body of professional men, along whatever lines their usual work may fall.

Naturally engineers do not usually read medical papers, and we do not know to what extent the subject of influenza may have been discussed in such papers, but the three articles which appear in the above-mentioned issue of the Boston society's journal, are certainly more instructive than any articles that have appeared in monthly or weekly magazines, daily newspapers or other engineering journals. The most striking fact brought out in one of the three papers,—by Dr. Brooks, chief surgeon of the Massachusetts State Guard and founder of the Brooks Hospital at Brookline, Mass.,—is that by open air treatment a tremendous reduction in death rate was obtained. The death rate ranged from 30% to 50% for indoor treatment in most hospitals, says Dr. Brooks, while out of doors, in the camps throughout the state that were under his direction, the highest death rate was 16%, while at the Barre, Mass., tent hospital there were but four deaths out of 114 cases.

To the first tent hospital established in Massachusetts were sent 351 of the worst cases from among 1,200 army and navy patients, and out of the 351 cases only 35 died.

"Of one thing I am convinced,—that hospital wards are not the places for the treatment of influenza," concludes Dr. Brooks. "Up to the time that I went into the study of this big epidemic, I believed in the big hospitals. I believed that the wards were fine. To-day I am convinced that wards in hospitals are absolutely dangerous for diseases of the respiratory tract, and that they should be done

away with. I am not sure that this is not true of other diseases besides influenza and pneumonia."

The experience gained in the ten tent hospitals established throughout Massachusetts proved that ordinary tents have their disadvantages for this work, as the space at the top becomes foul and there is no satisfactory way of introducing ventilation there; also the doctors and nurses are tremendously exposed in the inclement weather in passing from tent to tent.

Dr. Brooks suggests the construction of a series of cubicles, or shacks, 9 ft. by 9 ft., facing south or southwest, with a communicating passage, or hallway, on the north side. This passage could be heated and used in comfort by the attendants.

The fronts of the cubicles should be hinged on the floor so that they could be let down in all but the very worst weather, leaving the whole front side of the cubicle open to the air and also permitting the beds to be rolled out onto the ground or onto the lowered front, which could be used as a platform. The rear space would provide an eave, permitting of the circulation continually of a current of fresh air. As an alternative design, the front of the cubicle could consist of shutters that could be let down when storms come from the south or southwest.

Medical authorities agree that we will have another epidemic of influenza next fall, although not so severe as the last epidemic. They state that it is quite likely that the epidemic will recur every fall for some years, diminishing in severity and gradually passing away. If this is the prospect that this country has to face, and with the little accurate knowledge that there now is concerning the cause and prevention of this disease, it behooves the authorities of every province and municipality throughout Canada to adopt preparatory measures, so that when the epidemic comes again they will be fully prepared to combat it more scientifically and more successfully than was done last fall.

Large camps should be built this summer in every city and town throughout Canada. If any camp is not needed, so much the better, and the loss of the few hundred dollars that it costs will not be seriously missed. If the camps are needed, they will be needed quickly, and their existence, complete and ready to use, will be an enormous boon to the community and will help to solve the nursing, feeding and quarantine problems; and if results are obtained equal to those in Massachusetts last fall, thousands of lives will be saved.

We do not know whether any statistics have been prepared of the percentage of deaths last fall in Canadian hospitals, but it is quite likely that they would not be very much better than those shown by the American hospitals. At the Cooke Hospital in Chicago, said to be one of the finest in the country, there was a mortality of 31%, during the epidemic, while at the Massachusetts open-air camps there was a death rate of only 3% or 4% at some camps, the highest running to but 16%, and in the camp that had this high rate, some very advanced cases were treated, 39% of the cases that died having terminated fatally within the first 24 hours. At the Corey Hill open-air camp, which was one of the largest, the death rate was 10.25%.

The value of open-air treatment of influenza is also supported by the fact that 11.05% of the men of the United States navy who were quartered in the Commonwealth Pier buildings in Boston contracted influenza, while of those who were stationed in tents at Framingham camp, only 2.05% contracted the disease. The men at these two stations had arrived in the district only a short while previously, and all had been equally exposed to the infection.

The three physicians who read papers before the Boston Society of Civil Engineers, all admitted that the origin of influenza is still a mystery. Dr. Brooks states his conviction that it is spread by droplet infection, but at the same time admits that it puzzles him to know why a farmer out in the country, who is not within a mile of a droplet and who has not been into town for months, should contract the disease; why at sea, after the ship has been out six or seven days, men should be taken ill with influenza; why it travels from east to west; why it goes to