chief present conditions to which we have advanced in the practical applications of sanitary science, which are as yet but very imperfectly known. He stated nothing upon hypothesis, or Uptopian ideals, but upon well examined experiences.

It is no Utopia that death-rates in towns have been reduced by one-half through the work of the sanitary engineer alone. It is no Utopia that the death-rate at Rugby, for example, which was one of the towns first treated by our first General Board of Health, was then twenty-four in a thousand, and is now only twelve. It is no Utopia that at Salisbury the old death rate, which at the beginning of the century was as high as forty in a thousand, is now about sixteen: or that at Croydon and a number of other places, death-rates of twenty-four in a thousand now average fifteen. These reductions have been effected by the system of "circulation versus stagnation," which is yet to be made generally understood, to be by constant and direct supplies of water, by the removal of the fouled water through selfcleansing house-drains and self-cleansing sewers, and by the removal of the refusefresh and undecomposed, and unwastedon to the land.

The reduction of the annual death-rate is, of course, accompanied by an advance

of the life-rate, and the Registrar-General gives examples of what that advance may be. At Rugby the life-rate has been extended to all living there, of every class, by eight years, or from thirty-three to fortyone-years. At Hastings the duration of life has been advanced for five years and five months, but for females an average of eight years and one month. At Leek it has been extended by ten years; at Croydon and Salisbury and other places, the extension has been from six to seven years, females, as a rule, obtaining, by our science, the greatest share -that is to say, some eight years more of life-rate, more of painless life, more of health and strength and beauty. These extensions of the life-rates, as yet little known and regarded, belong however to all classes whose life-rate is largely the lowest, the extension will be found to be the greatest. To them the greatest gain developed is by the house alone, the "model dwelling," the work of the samtary architect, giving ten years more of life and working ability, a result cheap to pay for by extra rents, and which would be still further improvable by the removal of surrounding deteriorating conditions, especially bad schools and ill-conditioned places of work.

SANITARY SUGGESTIONS ON MILK SUPPLY.

M.R. George McKay, Sanitary Inspector for the Burgh of Govan, Scotland, has prepared the following Memorandum of extra legislative powers proposed to be obtained by Local Authorities, in dealing with the sale of mick, and which are not at present conferred by the "Public Health Act, (from the Sanitary Journal, Glasgow).

- 1. Compulsory notification to the Sanitary Inspector of existence of infectious disease in dairyman's house or registered premises, or of illness from infectious disease of any person employed in the sale or distribution of the milk.
- 2. Compulsory power beyond what is contained in Public Health Act of removal

- to hospital of infected patients from a dairy or dairyman's house.
- 3. Power of stoppage of milk supply after removal until incubating period of specific disease is over.
- 4. In event of non-removal, power of instant and complete stoppage of milk supply to any member of the public until premises and milk are certified by medical officer to be free from all risk of communicating disease to the inhabitants.
- 5. Power to Local Authority to inspect and examine dairies and milkshops in any place situated beyond their municipal limits; and on the certificate of their Medical Officer of Health, or any medical practitioner, that infectious disease is