

25 years previous to 1909 the percentage of all deaths was 11 per cent., in 1909 10 per cent., and last year 9.5 per cent.

Tuberculosis is still, however, a most formidable scourge. More people die from it than from any other disease. Each year sees it destroy 1,995,000 of the world's population. In the United States the yearly deaths amount to 100,000. This means 3,000 a day, or two persons in every minute. In Canada it is estimated that 13,500 persons die from Consumption each year. In this Province 2,511 persons died from the disease in the year 1909, and 1 death in every 13 is chargeable thereto.

These are but a very few of the ascertained facts in relation to the ravages of this disease. The former opinion respecting the heredity of the disease is now disproven. It is the unanimous opinion of physicians that the disease is communicable from the sick to the well largely by means of the expectoration of the careless consumptive. Just as we are able to prevent the spread of other communicable diseases by isolation or segregation of the ones affected, so can the spread of this disease be controlled.

Professor Wilcox of Cornell University says: "A decreasing amount of tuberculosis appears in connection with an increase in the proportion of advanced cases segregated in hospitals or other institutions, and this almost regardless of any and all other factors. A stationary or increasing amount of tuberculosis appears in connection with a failure thus to segregate advanced cases in hospitals or other institutions, and this almost regardless of any and all other factors.

Dr. Arthur Newsholme, one of England's greatest statisticians, says: "No influence except that of institutional segregation has appeared in actual experience in a constant relation to the amount of tuberculosis, and it must therefore be accepted as having been the predominant influence."

Countries like England, Germany and the United States, where the greatest advance has been made in Sanatorium Treatment, show the greatest decline in the death-rate. Ireland, on the other hand, without, until very lately, facilities for the care of its large proportion of tuberculous cases has an increasing death-rate. This

leads us at once to the consideration of what is nowadays regarded as one at least of the most important plans of treatment of this disease, viz., by means of the Consumptive Sanatorium.

What are the objections urged against sanatoria? It is said that they are the newest fad of a profession of faddists. This argument falls to the ground when we recollect that in 1747 a Scottish physician in the Highlands of Scotland writing to his friends in London advised that Consumption should be treated in the open air and with a generous diet—the underlying principles of sanatorium treatment.

To a Warwickshire physician, Dr. George Bodington, is ascribed the honor of establishing in the year 1840 the first Sanatorium for Consumption in the world. Like many other new and valuable discoveries in our profession, this plan of treatment met with such determined opposition that Bodington was obliged to abandon his system of treatment and the earliest sanatoria became an insane asylum.

The idea of this English pioneer was taken up by Dr. Brehmer, who nineteen years later (that is to say in 1859) founded the first German Sanatorium for Consumption at Görbersdorf. So that, while Germany is popularly supposed to have the credit for the earliest sanatorium, such credit really belongs to Great Britain.

It is therefore quite clear that the use of institutions for the treatment of Consumption is not a new fad, but, on the contrary, has been in existence for nearly three-quarters of a century, or since the time when the death-rate from this disease began first to decline.

It is claimed that the results obtained in sanatoria do not justify their existence as a special plan of treatment. There are two functions fulfilled by sanatoria:

- (1) Their value in limiting the spread of the disease.
- (2) Their value in its cure.

As already stated, Consumption, being an admittedly communicable disease, isolation of its victims is as rational as the isolation of scarlet fever, diphtheria, measles or smallpox. No one will seriously question the value of the segregation of the various so-called infectious diseases. It is the well-established and universal