

been found advantageous in some cases was applied to all and every patient. No matter what his ailment might be he had to submit to a loss of blood. Later it was found that some patients instead of being benefited by this process were actually made worse and so bleeding came into disrepute. The profession ran to the other extreme and bleeding was utterly tabooed. Both extremes were wrong. Bleeding was undoubtedly injurious in some cases and it was just as surely beneficial in other cases. So too with regard to the use of cold water. Not many years ago a Medical man who would give a fever patient a drink of cold water would have been regarded as guilty of his patient's death if the case proved fatal. To-day no doctor thinks of refusing his fever patients cold water. In our opinion, as we have said, there is danger of running to extremes in the treatment of tuberculosis. It has been clearly demonstrated that this disease is due to a bacillus that is communicable from one patient to another, and that the germ which so communicates the disease is contained in the sputum and other discharges. So it has rightly been determined that a tuberculous patient should not be allowed to mingle promiscuously with others who are not as yet affected ; that he should, as far as possible, be isolated ; that every care should be taken to destroy the bacilli contained in the sputum and other discharges from a tuberculous patient. This is all good, right and proper. Some would, however, go further and exclude all tuberculous patients from our public hospitals. This, in our opinion, is carrying isolation to an unnecessary extreme. We believe that the hospitals of at least one city in the Province of Ontario has adopted the rule of refusing admission to patients suffering from tuberculosis. We have reason to fear that other institutions, while not absolutely refusing such patients admission, look upon their admission with disfavour and get rid of them as soon as they decently can. We believe that this is not right. We believe that there is no necessity for thus refusing tuberculosis patients admission to our public hospitals. We believe that such patients can be admitted to our hospitals and properly cared for without exposing the other patients to the danger of contagion. We admit patients suffering from typhoid fever, from erysipelas and in some institutions patients affected with