

tial features of an ideal organization for the prevention and treatment of tuberculosis in any great municipality.

It is, of course, evident that in respect to any infectious disease a comprehensive system of notification and registration of all cases of the disease must precede any systematic attempts for its prevention, and yet this fundamental procedure has everywhere met with great opposition and has only recently been generally accepted. Even now the system of notification is often most incomplete, and in comparatively few communities is a determined effort made by the sanitary authorities to enforce the existing regulations. The opposition to this measure, however, both in the medical profession and among the laity is so rapidly decreasing and the recognition of its importance is becoming so general that the difficulties of enforcement should soon disappear.

In New York City we have had a system of compulsory notification in operation for fifteen years and preceding this a partly voluntary and partly compulsory system was in force for three years; so that at the present time, the registration of cases of tuberculosis is, I believe, more complete than in any other great city of the world. In 1911, 65,333 cases of tuberculosis were reported to the Department of Health, of which 23,513 cases were new and 41,820 cases were duplicates. The latter are cases which were reported more than once in the calendar year, or which had been reported in previous years.

Given a system of complete notification and registration, the sanitary authorities should possess effective measures for dealing with the cases notified. These measures include provisions for:

(a) Bacteriological examinations of sputum, to aid in the diagnosis and surveillance. This measure was adopted first in New York in 1894, and the example has now been very generally followed everywhere in this country and in Great Britain. In New York City, in the first year, 1894, 511 specimens of sputum were examined. In 1911, 40,048 specimens were examined. On the Continent of Europe there is still very little general recognition of the importance of the pro-

vision of means by the sanitary authorities for such examinations.

(b) Provision must be made for the renovation or efficient disinfection, or both, of premises vacated by death or removal, as well as, in some instances, for the periodic disinfection of rooms occupied by tuberculous cases.

(c) As tuberculosis is a very chronic disease, often extending over a number of years, during which time a case may be a source of infection to others, it becomes necessary to provide for the education and supervision of cases occurring in the homes of the poor during this long period. Experience has generally shown that this can best be effected through the visits of trained nurses, who shall instruct patients and their families in the measures of precaution to be taken and who shall report to the sanitary authorities on the sanitary conditions existing in the homes of the poor.

A better comprehension of the nature of the tuberculosis problem and the means necessary for its prevention, especially as applied among the working classes in a large city, has thrown more and more emphasis upon the importance of the provision of free public institutions of various types for the care of cases of tuberculosis of different organs and in different stages of the disease, and also for the care of anemic and ill-conditioned children in those families who have no definite evidence of tuberculous disease or only a closed inactive lesion. In New York City, a number of different kinds of institutions have been established to meet these various indications, and I wish to discuss them somewhat in detail, as I feel that they have come to play a most important part in the solution of the tuberculosis problem. Moreover, I think they are being developed in a better co-ordinated and a more comprehensive way in New York City than anywhere else in this country.

First I shall refer to the *Tuberculosis Clinic or Dispensary*. Little now need be said to urge the importance of the special tuberculosis clinic in this work. This has been so long accepted and the early work of Philip of Edinburgh has received such wide recognition that further emphasis is scarcely required. The organization of the